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# **2018 House of Delegates Addendum V2**

# 1 2016-2018 Strategic Plan



## 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-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.**

**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

Approved by the Board, April 2015; approved by the House of Delegates, Resolutions 102A and 102B, June 2015; Amended by the House of Delegates, Resolution 103, November 2017



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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.

	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 ( <i>By Invitation</i> ) – S103BC																																																																																				
	10:00 a.m.	5:00 p.m.	AGD Foundation Meeting ( <i>By Invitation, Offsite</i> )																																																																																				
	1:00 p.m.	5:00 p.m.	Spokesperson Training ( <i>By Invitation, Offsite</i> )																																																																																				
	3:00 p.m.	7:00 p.m.	Attendee Registration Desk – Grand Ballroom S100AB																																																																																				
	4:00 p.m.	6:00 p.m.	Credentials and Elections Committee Meeting ( <i>By Invitation</i> ) S101B																																																																																				
Friday 11/2/18	7:00 a.m.	10:30 a.m.	Attendee Registration Desk – Grand Ballroom S100AB																																																																																				
	8:00 a.m.	10:30 a.m.	House of Delegates First Session & Awards Ceremony – Grand Ballroom S100AB																																																																																				
	11:00 a.m.	12:00 p.m.	Candidates Forum – S102BCD																																																																																				
	12:00 p.m.	1:00 p.m.	Reference Committee Lunch ( <i>By Invitation</i> ) S106A																																																																																				
	12:00 p.m.	1:00 p.m.	Past Presidents’ Forum Lunch ( <i>By Invitation</i> ) S106B																																																																																				
	1:00 p.m.	2:30 p.m.	Reference Committee on Advocacy & Other Priorities – S102BCD																																																																																				
	2:30 p.m.	4:00 p.m.	Reference Committee on Administration, Image & Membership – S102BCD																																																																																				
	4:00 p.m.	5:30 p.m.	Reference Committee on Continuing Education – S102BCD																																																																																				
	5:30 p.m.	7:00 p.m.	Candidates’ Reception – Grand Ballroom S100C																																																																																				
Saturday 11/3/18	8:00 a.m.	10:00 a.m.	Town Hall Meeting – S102BCD																																																																																				
	10:15 a.m.	4:00 p.m.	<table border="1"> <thead> <tr> <th>Start time</th> <th>End time</th> <th>Official Function Name</th> <th>Room</th> </tr> </thead> <tbody> <tr> <td>11:00 AM</td> <td>3:00 PM</td> <td>Region 1 Caucus</td> <td>S405A</td> </tr> <tr> <td>10:15 AM</td> <td>1:30 PM</td> <td>Region 2 Caucus</td> <td>S403A</td> </tr> <tr> <td>10:15 PM</td> <td>1:00 PM</td> <td>Region 3 Caucus</td> <td>S401D</td> </tr> <tr> <td>10:15 AM</td> <td>2:00 PM</td> <td>Region 4 Caucus</td> <td>S403B</td> </tr> <tr> <td>10:15 AM</td> <td>4:00 PM</td> <td>Region 5 caucus</td> <td>S105D</td> </tr> <tr> <td>10:15 AM</td> <td>4:00 PM</td> <td>Region 6 Caucus</td> <td>S105BC</td> </tr> <tr> <td>10:15 AM</td> <td>1:00 PM</td> <td>Lionel French Region 7 Caucus</td> <td>S401A</td> </tr> <tr> <td>10:15 AM</td> <td>4:00 PM</td> <td>Region 8 Caucus</td> <td>S106B</td> </tr> <tr> <td>10:15 AM</td> <td>1:00 PM</td> <td>Region 9 Caucus</td> <td>S402A</td> </tr> <tr> <td>10:15 AM</td> <td>3:00 PM</td> <td>Region 10 Caucus</td> <td>S404D</td> </tr> <tr> <td>10:15 AM</td> <td>4:00 PM</td> <td>Region 11 Caucus</td> <td>S104A</td> </tr> <tr> <td>10:15 AM</td> <td>2:30 PM</td> <td>Region 12 Caucus</td> <td>S404A</td> </tr> <tr> <td>10:15 AM</td> <td>4:00 PM</td> <td>Region 13 Caucus</td> <td>S405B</td> </tr> <tr> <td>10:15 AM</td> <td>2:30 PM</td> <td>Region 14 Caucus</td> <td>S404BC</td> </tr> <tr> <td>10:15 AM</td> <td>1:15 PM</td> <td>Region 15-16 Caucus</td> <td>S402B</td> </tr> <tr> <td>10:15 AM</td> <td>4:00 PM</td> <td>Region 17 Caucus</td> <td>S104B</td> </tr> <tr> <td>10:15 AM</td> <td>1:00 PM</td> <td>Region 18 Caucus</td> <td>S401BC</td> </tr> <tr> <td>10:15 AM</td> <td>4:00 PM</td> <td>Region 19 Caucus</td> <td>S103D</td> </tr> <tr> <td>10:30 AM</td> <td>4:00 PM</td> <td>Region 20 Caucus</td> <td>S106A</td> </tr> <tr> <td>10:15 AM</td> <td>4:00 PM</td> <td>Caucus Support</td> <td>S103A</td> </tr> </tbody> </table>	Start time	End time	Official Function Name	Room	11:00 AM	3:00 PM	Region 1 Caucus	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 AM	3:00 PM	Region 10 Caucus	S404D	10:15 AM	4:00 PM	Region 11 Caucus	S104A	10:15 AM	2:30 PM	Region 12 Caucus	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
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	6:00 p.m.	TBD	President’s Reception – ( <i>Registration Required</i> ) Revel Motor Row, 2400 S Michigan Ave, Chicago, IL																																																																																				
Sunday 11/4/18	7:00 a.m.	8:00 a.m.	Election – Grand Ballroom S100AB																																																																																				
	8:00 a.m.	12:00 p.m.	House of Delegates Second Session – Grand Ballroom S100AB																																																																																				
	12:00 p.m.	1:00 p.m.	HOD Lunch Break – On Own																																																																																				
	12:00 p.m.	1:00 p.m.	Board Lunch (current and incoming Trustees) – S103D																																																																																				
	1:00 p.m.	End	House of Delegates Third Session ( <i>If necessary</i> ) – Grand Ballroom S100AB																																																																																				
	45 minutes post 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

<b>Resolution #</b>	<b>Brief Description</b>	<b>Ref. Comm. Assignment</b>
101	Adopt the 2019-2021 AGD Strategic Plan	Admin/Image/Mem 2:30 – 4:00 pm
<a href="#">102</a>	Region II Dental Student Subsidy Resolution For the 2018 Governance Meeting	Admin/Image/Mem 2:30 – 4:00 pm
<a href="#">103</a>	AGD Financial Support of AGD Student Chapters	Admin/Image/Mem 2:30 – 4:00 pm
<a href="#">104</a>	AGD Membership Dues Waiver for AGD Student Chapter Faculty Advisors/Leaders	Admin/Image/Mem 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 Changes Recognition to Award	Continuing Education 4:00– 5:30 pm
203	Lifelong Learning and Service Recognition Guideline Changes Limitation to One Recognition	Continuing Education 4:00– 5:30 pm
204	Scientific Session Registration Cancellation Policy 2014:105R-H-6 Amendment	Continuing Education 4:00– 5:30 pm
205	Amend the Names of the Exam Committees in the BPM, HOD Policy Manual and Constitution and Bylaws	Continuing Education 4:00– 5:30 pm
301	Create Electronic Information Reception Policy	Advocacy/Other Priorities 1:00 – 2:30 pm
302	Rescind HOD Policy 93:28 H 7 Health Care Reform Criteria	Advocacy/Other Priorities 1:00 – 2:30 pm
303	Amend Rules of Procedure HOD Reference Committee Timing	Advocacy/Other Priorities 1:00 – 2:30 pm
304	Amend Election Guidelines & Bylaws to Eliminate Early Declaration of Candidacy by EC Officers	Advocacy/Other Priorities 1:00 – 2:30 pm
305	Amend Bylaws to Reflect Authority of President-Elect to Make Council and Committee Appointments	Advocacy/Other Priorities 1:00 – 2:30 pm
<a href="#">306</a>	Adopt Policy Positions on Dental Benefits for the Medicare Population	Advocacy/Other Priorities 1:00 – 2:30 pm
<a href="#">307</a>	Adopt Policy Statement on Dental Benefits for the Medicare Population	Advocacy/Other Priorities 1:00 – 2:30 pm





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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

<b>Dr. Narpat Jain, Chair</b>	<b>New Jersey 15</b>
<b>Dr. Jennifer Bone</b>	<b>Texas 16</b>
<b>Dr. Gordon Isbell, IV</b>	<b>Alabama 17</b>
<b>Dr. Michael Kaner</b>	<b>Pennsylvania 18</b>
<b>Dr. Tyler Scott</b>	<b>Ohio 19</b>
<b>Dr. Joseph Battaglia, Consultant</b>	<b>New Jersey 20</b>
<b>Dr. Steven Ghareeb, Consultant</b>	<b>West Virginia 21</b>
<b>Dr. Guy Acheson, Board Monitor</b>	<b>California 22</b>
<b>Dr. K. David Stillwell, Board Monitor</b>	<b>Arkansas 23</b>

25

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

28  
29 **Resolution 301**

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**“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**

1 and transmitting such copies to any AGD leader, unless otherwise authorized by the  
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 ~~1) — Be adequately funded to provide broad access;  
13 2) — Permit freedom of choice of dentists;  
14 3) — Be based on fee for service; and  
15 4) — Assure high quality dental care.~~

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 ~~1. — 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 ~~2. — 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 ~~3. — 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  
35 sector, b) development of cooperative dental benefit purchasing alliances administered in  
36 the private sector.~~

37  
38 ~~4. — The Association recommends that preventive services and educational programs for  
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  
41 prophylaxis and application of topical fluorides and sealants; dietary fluoride supplements;  
42 restoration of carious teeth; maintenance of space resulting from the early loss of primary  
43 teeth and patient education.~~

44  
45 ~~5. — The Association recommends that in the event that a more comprehensive program  
46 is enacted, preventive, diagnostic, emergency services and basic restorative and periodontal  
47 care be included for children and the elderly.~~



1  
2 ~~6. The Association believes that if the Medicare program is expanded to include~~  
3 ~~coverage for additional dental health care services, we would endorse the inclusion of a~~  
4 ~~defined dental benefit plan for the elderly population. These services would be expressly~~  
5 ~~focused on those elderly who are in long term residential care or home bound. Delivery of~~  
6 ~~these services should not be compromised by discrimination by category of provider~~  
7 ~~(physician or dentist)."~~

8  
9 **Resolution 303**

10  
11 **"Resolved, that the *Rules of Procedure for Conducting The Reference Committee Hearings***  
12 ***and Business of the Academy of General Dentistry's House of Delegates* be amended at**  
13 **paragraph 5 (e), so that they read:**

14  
15 **All Each Reference Committees must remain in session for a minimum of 90 minutes or**  
16 **until there are no all attendees at the microphones have left the room so that delegates have**  
17 **the opportunity to present their views before all each of the Reference Committees."**

18  
19 **Resolution 304**

20  
21 **"Resolved, that the Election Guidelines be amended, at Paragraph VIII (e), so that they**  
22 **read:**

23  
24 **A candidate will formally declare his or her candidacy for the coming year's election to**  
25 **constituent officers, Regional Directors, members of the Board and council and committee**  
26 **chairs not earlier than ~~the latter of~~ the commencement of the AGD Board meeting III ~~or~~**  
27 **~~January 1st~~ of the year in which the election is held. Notwithstanding this section, all AGD**  
28 **officers are primarily subject to the provisions of the AGD Bylaws, Chapter IX, Section**  
29 **1(B)4, which states "An AGD officer must declare for a new office within the thirty (30)**  
30 **days prior to Board Meeting III , and resign his or her current office effective at the close**  
31 **of the annual meeting pursuant Chapter IX, Section 1, paragraph D. Once an AGD officer**  
32 **declares for a new office, said resignation is irrevocable." Such notice may contain**  
33 **biographical and issue oriented information on his or her candidacy. A candidate shall not**  
34 **announce or circulate petitions for signatures at the preceding annual meeting. Nothing in**  
35 **these guidelines, including the filing deadline for other candidates, shall prohibit a**  
36 **candidate who makes a valid declaration of candidacy from campaigning, subject to all**  
37 **provisions of these guidelines.**

38  
39 **And be it further,**

40  
41 **Resolved, that the Bylaws be amended at Chapter IX B (4), so that they read**

42  
43 **An AGD officer must declare for a new office at least within the thirty (30) days before**  
44 **prior to Board Meeting III, and resign his or her current office effective at the close of the**  
45 **annual meeting, pursuant Chapter IX, Section 1, paragraph D. Once an AGD officer**  
46 **declares for a new office, said resignation is irrevocable."**

1  
2  
3 Resolution 305

4 “Resolved, that the Bylaws be amended at Chapter IX, Section 2 A 8 so that the entire  
5 sequence is stricken, so that it reads:

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 ~~a. To have the authority with regard to AGD councils to appoint only to those  
11 positions which have an expiration date at the annual meeting at which the president  
12 assumes that office.~~

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  
16 appointments made by the president-elect until such time as the president-elect provides  
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  
25 councils and committees that are listed in Chapter XIII, Sections 2 and 3 of these Bylaws,  
26 subject to the following stipulations:

27  
28 a. 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  
33 these Bylaws, are subject to approval by the Board. The Board may reject specific  
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  
46 cannot support the inclusion of dental benefits.  
47

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

3  
4 **4. The AGD believes that it is the responsibility of every person to exercise good oral**  
5 **health habits that will provide them with a foundation for optimal oral and systemic health**  
6 **throughout their lifetime, and that resources directed toward increasing oral health**  
7 **literacy will support this effort.”**

8  
9 **Resolution 307**

10  
11 **“Resolved, that AGD’s policy on dental benefits for the Medicare population include the**  
12 **following statement:**

13  
14 **‘The Medicare program was established to provide medical benefits to the elderly U.S.**  
15 **population. Signed into law in 1965, the Medicare program has been amended numerous**  
16 **times since its inception. Some public health advocates and consumer groups seek to have**  
17 **dental benefits added into the Medicare Part B program. The Academy of General**  
18 **Dentistry (AGD) does not support this approach, as it believes that it is not a viable**  
19 **solution. Rather, the AGD supports free market-based private insurance solutions for**  
20 **dental benefits intended for the Medicare population.’”**

1 Resolution 306

2  
3 **“Resolved, that the AGD’s positions on dental benefits for the Medicare population are as**  
4 **follows:**

5  
6 **1. General dentists are committed to delivering quality dental care to patients of all ages**  
7 **and to advocating for optimal oral health.**

8  
9 **2. The AGD believes that the Medicare Part B program is fiscally unsustainable and**  
10 **cannot support the inclusion of dental benefits.**

11  
12 **3. The AGD suggests enhanced benefits and reimbursement in private sector initiatives for**  
13 **dental benefits.**

14  
15 **4. The AGD believes that it is the responsibility of every person to exercise good oral**  
16 **health habits that will provide them with a foundation for optimal oral and systemic health**  
17 **throughout their lifetime, and that resources directed toward increasing oral health**  
18 **literacy will support this effort.”**

19  
20 **AIRBIII2018#01 - Adopt Policy Positions on Dental Benefits for the Medicare Population**

21  
22 **Prepared by:** Jeanie Kennedy, Manager, Dental Practice & Policy

23  
24 **Date of Report:** May 23, 2018

25  
26 **Staff Resources:** \$50 (Approx. 1 hour of staff time to draft the AIR)

27  
28 **Total Financial Cost:** \$50 in staff resources (no direct costs)

29  
30 **Budget Ramifications:** None

31  
32 **Action/Timeline:** Record vote at 2017-2018 Board Meeting III, for forwarding to the 2018  
33 AGD HOD.

34  
35 *At 2017-2018 Board Meeting III the Board adopted an amended version of the resolution but*  
36 *upon request of the councils for the Board to have adopted the resolution as originally presented*  
37 *notwithstanding one editorial correction, the Board then adopted the resolution as requested by*  
38 *the councils at the July 24 Zoom.*

39  
40 **BOARD RECOMMENDS ADOPTION AIRBIII2018#01**

41  
42 *Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gehrig, Gorman, Guter, Hanson,*  
43 *Harunani, King, Olsen, Smith, Stillwell, Tillman, Uppal, White, Wooden*

44  
45 *N – Kozelka, Shelly*

46  
47 *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,  
30 and state and federal regulatory bodies.

31  
32 **Introduction:**

33  
34 In January 2018, at the request of the Legislative & Governmental Affairs (LGA) Chair, the  
35 Dental Practice Council discussed development of an AGD policy paper on addressing dental  
36 benefits for the Medicare-eligible population.

37  
38 Specifically, the Council discussed three options: dentistry as a part of Medicare; dental benefits  
39 through private payers under Medicare Advantage supplemental plans; and the free market.

40 Members of the Council opposed dentistry as part of Medicare, and favored improved  
41 reimbursement rates for private solutions.

42  
43 The Council assigned Dental Practice & Policy staff with the task of developing a policy paper  
44 on the issue.

45  
46 Accordingly, the Manager, Dental Practice & Policy, crafted a confidential draft policy paper,  
47 entitled *AGD Position Statement on Dental Benefits for the Medicare Population*, and presented

1 the paper to the Dental Practice Council and LGA Council via AGD Connect prior to the May  
2 meeting, as well as at the May council meetings, for review, discussion, and recommendation for  
3 adoption.

4  
5 The Councils applauded the research and work put into the paper. While the Councils noted the  
6 need for further ongoing refinement of the background content of the position paper, they found  
7 the conclusive policy positions at the end of the paper to be suitable for immediate adoption,  
8 with some amendment. All but three members of the Councils, collectively, voted affirmatively  
9 in support of these amended policy positions.

10  
11 The present AIR requests adoption of these four amended policy positions, in an effort to have  
12 AGD provisional policies on the matter ASAP, especially in light of ongoing advocacy efforts of  
13 councils of the American Dental Association and other organizations on this issue.

14  
15 It is the intent of the AGD Dental Practice and LGA Councils that the entire policy paper,  
16 inclusive of these four policy positions, will be presented to the 2017-2018 Board Meeting IV for  
17 adoption, to include and supercede the policy positions adopted at 2017-2018 Board Meeting III.

18  
19 **Necessary Information:**

- 20
- 21 • *Note: Members of the DP & LGA Councils believed that the language in policy position*  
22 *#2 as amended by the Board at 2017-18 Board Meeting III could have positioned the*  
23 *AGD as an unsophisticated consumer of federal health care information and data. Some*  
24 *members of the councils believed that the AGD would have damage its reputation as a*  
25 *credible organization if the Board-approved policy position #2 were to have been*  
26 *presented in the public domain. Specifically, the members of the DP & LGA Councils*  
27 *believed that it would have been perilous territory to open the door to enable the federal*  
28 *government to impose new taxes to support dental benefits for the Medicare population.*  
29 *Council members believed that the AGD should not be party to proposals or language*  
30 *that would increase taxes on American citizens. Previous AGD House of Delegates tax*  
31 *positions are in favor of tax credits, tax incentives, tax deductions, and tax reform, not*  
32 *tax increases. Accordingly, the councils brought the policy position #2 back to the Board*  
33 *with the request that the Board undo its amendments and accept the policy position as*  
34 *originally presented at Board Meeting III, notwithstanding an editorial edit.*
  - 35 • Dr. Steven Ghareeb, Chair, Dental Practice Council, has provided input into this report.
  - 36 • Dr. Joseph Battaglia, Chair, LGA Council, has provided input into this report.
  - 37 • At their 2018 House of Delegates meeting, the American Dental Association (ADA)  
38 delegates are expected to vote on a policy statement advocating for the inclusion of dental  
39 benefits into Medicare Part B.
  - 40 • The ADA is purported to have hired a federal lobbyist for the express purpose of  
41 acquiring support for legislation to include dental benefits into Medicare Part B.
  - 42 • The AGD intends to take a different position with respect to Medicare than the ADA,  
43 specifically that the Medicare Part B program cannot support the inclusion of dental  
44 benefits.
  - 45 • Editing of the background sections of the full policy paper (*AGD Position Statement on*  
46 *Dental Benefits for the Medicare Population*) is ongoing and expected to be completed  
47 for submission to the Board in July 2018 for approval at the 2017-2018 Board Meeting  
IV in August.

1  
2 **What We Don't Know:**

- 3 • Staff is investigating other policies in the HOD Policy Manual that will be inconsistent  
4 with the new AGD policy clauses. In an effort to have clear and concise positions that are  
5 effective for AGD's legislative and communication purposes, staff and the Council(s)  
6 may request rescission of some existing HOD policies upon submission of the full policy  
7 paper for the 2017-2018 Board Meeting IV.  
8  
9

10 **Pros and Cons:**

11  
12 **Pros:**

- 13 • Adoption of the content of the four policy clauses as AGD HOD policy would cement its  
14 principles as the formal position of the AGD for use in legislative, regulatory, and public  
15 relations efforts.  
16 • Adoption of the content of the 4 policy clauses in June will enable the AGD to hold them  
17 out to legislators and other organizations as the AGD's 'provisional' policy, without  
18 having to wait until further deliberation of the councils on the background of the full  
19 policy paper for adoption at 2017-2018 Board Meeting IV.  
20

21 **Cons:**

- 22 • Adoption of the content of the 4 policy clauses may not find 100% agreement within the  
23 AGD membership, as noted by the three negative votes within the representation of the  
24 Dental Practice and LGA Councils.  
25

26 **Executive Director/CEO Recommendations:**

27  
28 **How It Fits into the Market Research:**

29  
30 The Custom Study of Academy of General Dentistry (AGD) Members: Membership Benefits  
31 Survey (September 2012) (i.e., the Market Research) focused on member-facing programs.  
32 While the present request does not fit neatly into the measurement targets of the Market  
33 Research, the present request is ultimately expected to strengthen our advocacy efforts. State  
34 Advocacy and Federal Advocacy were generally rated as high value, moderate satisfaction in the  
35 Market Research.  
36

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

39  
40 Yes, staff will recommend the deletion of the 93:28-H-7 policy as it will not be consistent with  
41 new AGD policy. However, the Dental Practice and Legislative & Governmental Affairs  
42 councils have not yet deliberated a resolution on this matter, but are expected to do so for  
43 submission of a rescission or amendment request to 93:28-H-7 for 2017-2018 Board Meeting IV.  
44  
45

46 **Responsible Staff Liaison & AGD member:**  
47



1 Jeanie Kennedy  
2 Manager, Dental Practice & Policy  
3 312.440.4347 – phone  
4 [jeanie.kennedy@agd.org](mailto:jeanie.kennedy@agd.org)  
5

6 Steven A. Ghareeb, DDS, FAGD  
7 Chair, Dental Practice Council  
8 304.744.3333 - p  
9 [sstevenamos@aol.com](mailto:sstevenamos@aol.com)  
10

11 **Suggested Council or Agencies to Complete Action:**  
12

13 Dental Practice and Legislative & Governmental Affairs Councils, and the HOD..  
14

15 **Suggested Councils or Agencies to be Involved in Collaboration:**  
16

17 The Dental Practice and Legislative & Governmental Affairs Councils, and the HOD..  
18  
19

20 **Chair Approval Email:**  
21

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>  
26 **Subject:** Re: Medicare AIR- Response Requested by end of day Thurs. May 24, 2018  
27

28 I approve. Great job. there is a lot that went into this one.  
29

30 steven  
31

32 **From:** J B [mailto:battagja@prodigy.net]  
33 **Sent:** 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 **Sent:** 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>;  
45 Max Moses <Max.Moses@AGD.org>; Srinivasan Varadarajan <Srinivasan.Varadarajan@AGD.org>  
46 **Subject:** Re: Medicare AIR- Response requested end of day Thurs. May 24, 2018  
47

48 Looks good to me.  
49

1 **Board Liaison Review Email:**

2  
3 **From:** Robert D. Gehrig [mailto:rdgehrig@comcast.net]  
4 **Sent:** 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>  
7 **Subject:** 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](mailto: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 **Subject:** RE: 2nd Request- Medicare AIR- Response requested end of day Thurs. May 24, 2018

22  
23 I approve this AIR for discussion by the Board.

24  
25 **CFO Review Email:**

26  
27 **From:** Christa Ojeda  
28 **Sent:** Friday, May 25, 2018 9:30 AM  
29 **To:** Jeanie Kennedy <Jeanie.Kennedy@AGD.org>  
30 **Subject:** 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

**AIR Addendum – HOD Policy Change Request**

**Action:**        Add     X        Revise \_\_\_\_\_    Delete \_\_\_\_\_

**Existing Policy to Revise/Delete:**

This AIR requests an addition to policy, not a revision or deletion.

However, current policy 93:28-H-7 (pasted below) supports ADA policy that states, in part, “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.”

This would conflict with the new policy, which opposes inclusion of dental benefits in Medicare Part B.

Furthermore, Medicare Part C, otherwise known as Medicare Advantage, which is a privately implemented solution, may not entirely be based on a fee-for-service payment to providers.

As a result of these discrepancies with the anticipated new AGD policy, the staff recommendation is to rescind, or rescind in part, the 93:28-H-7 policy as it will not be consistent with new AGD policy.

However, the question of whether to rescind 93:28-H-7, either in whole or in part, has not yet been deliberated by the Dental Practice and Legislative & Governmental Affairs councils.

Accordingly, it is the recommendation of staff and the council chairs to present rescission of this policy along with the entire policy paper at the 2017-2018 Board Meeting IV, and to adopt the policy provisions presented with this AIR as a stopgap measure to ensure that we have provisional policy available ASAP for advocacy purposes.

Existing policy 93:28-H-7 states as follows:

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:

- 1. 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

1 dental care, and which would not require public sector participation and subsequent cost transfer.  
2 The Association strongly opposes any change in the tax deductibility of current dental benefit  
3 coverage.  
4

5 2. Continue existing policy support for a separate, restructured program of publicly funded  
6 dental benefits for indigent persons. Priority consideration should be given to programs for  
7 children. The Association urges that these programs be administered in the private sector  
8 wherever possible.  
9

10 3. For population groups currently not receiving regular dental care the Association  
11 supports the opportunity for a) small employers purchase dental plans in the private sector, b)  
12 development of cooperative dental benefit purchasing alliances administered in the private  
13 sector.  
14

15 4. The Association recommends that preventive services and educational programs for  
16 children be included in any health system reform proposal. Preventive services may include but  
17 are not necessarily limited to, fluoridation of community water supplies, oral prophylaxis and  
18 application of topical fluorides and sealants; dietary fluoride supplements; restoration of carious  
19 teeth; maintenance of space resulting from the early loss of primary teeth and patient education.  
20

21 5. The Association recommends that in the event that a more comprehensive program is  
22 enacted, preventive, diagnostic, emergency services and basic restorative and periodontal care be  
23 included for children and the elderly.  
24

25 6. The Association believes that if the Medicare program is expanded to include coverage  
26 for additional dental health care services, we would endorse the inclusion of a defined dental  
27 benefit plan for the elderly population. These services would be expressly focused on those  
28 elderly who are in long-term residential care or home-bound. Delivery of these services should  
29 not be compromised by discrimination by category of provider (physician or dentist)."  
30

31 **Resolution Presented for Approval:**  
32

33 **Resolved, that the AGD's positions on dental benefits for the Medicare population are as**  
34 **follows::**  
35

36 **1. General dentists are committed to delivering quality dental care to patients of all ages**  
37 **and to advocating for optimal oral health.**  
38

39 **2. The AGD believes that the current Medicare Part B program is fiscally unsustainable**  
40 **and cannot support the inclusion of dental benefits.**  
41

42 **3. The AGD suggests enhanced benefits and reimbursement in private sector initiatives for**  
43 **dental benefits.**  
44

45 **4. The AGD believes that it is the responsibility of every person to exercise good oral**  
46 **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-](https://www.budget.senate.gov/imo/media/doc/PDF.Kotlikoff%20-%20Testimony%20to%20Senate%20Budget%20Committe%202-25-2015.pdf)  
29 [%20Testimony%20to%20Senate%20Budget%20Committe%202-25-2015.pdf](https://www.budget.senate.gov/imo/media/doc/PDF.Kotlikoff%20-%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](https://www.hoover.org/sites/default/files/research/docs/rauh_debtdeficits_36pp_final_digital_v2_revised4-11.pdf)  
33 [revised4-11.pdf](https://www.hoover.org/sites/default/files/research/docs/rauh_debtdeficits_36pp_final_digital_v2_revised4-11.pdf)

34  
35 International Monetary Fund, *World Economic Outlook*, April 2018, Cyclical Upswing,  
36 Structural Change. [http://www.imf.org/en/Publications/WEO/Issues/2018/03/20/world-](http://www.imf.org/en/Publications/WEO/Issues/2018/03/20/world-economic-outlook-april-2018)  
37 [economic-outlook-april-2018](http://www.imf.org/en/Publications/WEO/Issues/2018/03/20/world-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-](http://www.medpac.gov/docs/default-source/reports/mar18_medpac_entirereport_sec.pdf?sfvrsn=0)  
40 [source/reports/mar18\\_medpac\\_entirereport\\_sec.pdf?sfvrsn=0](http://www.medpac.gov/docs/default-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  
46 Spending and the Medicare Program, June 2017. [http://medpac.gov/docs/default-source/data-](http://medpac.gov/docs/default-source/databook/jun17_databookentirereport_sec.pdf?sfvrsn=0)  
47 [book/jun17\\_databookentirereport\\_sec.pdf?sfvrsn=0](http://medpac.gov/docs/default-source/databook/jun17_databookentirereport_sec.pdf?sfvrsn=0)

1  
2 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-](https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/ReportsTrustFunds/Downloads/TR2017.pdf)  
4 [Statistics-Data-and-Systems/Statistics-Trends-and-](https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/ReportsTrustFunds/Downloads/TR2017.pdf)  
5 [Reports/ReportsTrustFunds/Downloads/TR2017.pdf](https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/ReportsTrustFunds/Downloads/TR2017.pdf)  
6  
7 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  
12 Fertility Rate: 12-Month Ending 2015-Quarter 2, 2017.  
13 <https://www.cdc.gov/nchs/nvss/vsrr/natalty-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-](https://latest.13d.com/americas-biggest-and-most-predictable-train-wreck-unfunded-liabilities-5c6520b469be)  
17 [5c6520b469be](https://latest.13d.com/americas-biggest-and-most-predictable-train-wreck-unfunded-liabilities-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-](https://www.nationalreview.com/2018/04/federal-debt-problem-entitlement-reform-only-solution/)  
21 [solution/](https://www.nationalreview.com/2018/04/federal-debt-problem-entitlement-reform-only-solution/)  
22  
23 Centers for Medicare and Medicaid. "The only exception is hospice care. If a senior is in need of  
24 hospice care, payment is rendered from traditional Medicare. Centers for Medicare & Medicaid  
25 Services." [https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-](https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/hospice_pay_sys_fs.pdf)  
26 [MLN/MLNProducts/Downloads/hospice\\_pay\\_sys\\_fs.pdf](https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/hospice_pay_sys_fs.pdf)  
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28 Baker, LC, et al. Medicare Advantage Plans Pay Hospitals Less Than Traditional Medicare Pays.  
29 *Health Affairs*. Vol. 35, No. 8. August 2016.  
30  
31 Nasseh, Kamyar, Vujicic, Marko. Dental Care Utilization Continues to Decline among Working-  
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](http://www.ada.org/~media/ADA/Science%20and%20Research/HPI/Files/HPIBrief_1013_2.as)  
35 [hx](http://www.ada.org/~media/ADA/Science%20and%20Research/HPI/Files/HPIBrief_1013_2.as)  
36  
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20 [socialism-capitalism/](http://thefederalist.com/2017/11/01/study-nearly-half-millennials-prefer-socialism-capitalism/)  
21  
22 **Other Comments?**  
23



1 Resolution 307

2  
3 **“Resolved, that AGD’s policy on dental benefits for the Medicare population include the**  
4 **following statement:**

5  
6 **‘The Medicare program was established to provide medical benefits to the elderly U.S.**  
7 **population. Signed into law in 1965, the Medicare program has been amended numerous**  
8 **times since its inception. Some public health advocates and consumer groups seek to have**  
9 **dental benefits added into the Medicare Part B program. The Academy of General**  
10 **Dentistry (AGD) does not support this approach, as it believes that it is not a viable**  
11 **solution. Rather, the AGD supports free market-based private insurance solutions for**  
12 **dental benefits intended for the Medicare population.’”**

13  
14 **Adopt Policy Statement on Dental Benefits for the Medicare Population**

15  
16 **Prepared by:** Jeanie Kennedy, Manager, Dental Practice & Policy

17  
18 **Date of Report:** September 25, 2018

19  
20 **Staff Resources:** \$50 (Approx. 1 hour of staff time to draft the AIR)

21  
22 **Total Financial Cost:** \$50 in staff resources (no direct costs)

23  
24 **Budget Ramifications:** None

25  
26 **Action/Timeline:** Record vote at October 2018 Board Zoom, for forwarding to the 2018 AGD  
27 HOD.

28  
29 **BOARD RECOMMENDS ADOPTION**

30  
31 *Y – Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gehrig, Gorman, Hanson,*  
32 *Harunani, King, Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Wooden,*  
33 *Worm*

34  
35 *A – Acheson, Guter, Tillman, Winland*

36  
37 *N/A – Cordero*

38  
39 **How It Fits into the Strategic Plan (2016-18):**

40 Goal 2 – Advocacy: Strengthen and protect the general dentistry profession and the oral health of  
41 the public.

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

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

45  
46 **How it Fits into the Corporate Objectives:**

1 Corporate Objective #10 (Advocacy B): Ensuring that AGD HOD policies are current and  
2 appropriate is a prerequisite to enable representing policies of the AGD before CODA, the ADA,  
3 and state and federal regulatory bodies.  
4

5 **Introduction:**

6 Bolstered by robust discussions at the 2017-2018 Board Meeting III and the July 2018 Zoom  
7 Meeting, the AGD Board approved four policy positions that had undergone over six months of  
8 development and deliberation by the Dental Practice Council and Legislative and Governmental  
9 Affairs Councils. The four policy positions will be presented before the 2018 AGD HOD for  
10 adoption as AGD policy.  
11

12 As noted in the Action Item Reports (AIR) deliberated by the Board at the aforementioned  
13 meetings, a paper supporting the positions was also in development and was considered by the  
14 councils for submission to the Board and HOD as AGD policy.  
15

16 After considerable discussion, a subcommittee of the Dental Practice and LGA Councils, with  
17 the support of the councils, have found that the paper would more appropriately serve as a  
18 collection of facts and arguments to support AGD's enforcement of its policy positions, rather  
19 than as an HOD policy document itself.  
20

21 However, the subcommittee, with support of the councils, did find that the introduction of the  
22 paper provided a policy statement that served to supplement the four positions of the AGD and  
23 would serve well as a policy talking point.  
24

25 Accordingly, that introductory language is brought before this Board and the 2018 HOD for  
26 consideration of adoption as AGD policy.  
27

28 It would be acceptable to the councils should the 2018 AGD HOD choose to combine this policy  
29 statement with the four policy positions already approved by the Board such that a policy  
30 beginning with the above policy statement followed by the four positions statements is the  
31 outcome as encapsulated in AGD HOD policy.

32 **Necessary Information:**

- 33 • Dr. Steven Ghareeb, Chair, DP Council, has provided input into this report.
- 34 • Dr. Joseph Battaglia, Chair, LGA Council, has provided input into this report.
- 35 • The AGD DP and LGA Councils have, without any objections, approved the policy  
36 statement for submission as AGD HOD policy.  
37

38 **What We Don't Know:**

- 39 • We are unsure what actions the ADA HOD may take with respect to policy on the  
40 inclusion of dental benefits into Medicare Part B.  
41

42 **Pros and Cons:**

43  
44 **Pros:**

- 1 • This policy statement provides an elevator speech or talking point for various AGD  
2 departments, public information officers, and others to use.
- 3 • At their 2018 House of Delegates (HOD) meeting, the American Dental Association  
4 (ADA) delegates are expected to vote on a policy advocating for the inclusion of dental  
5 benefits into Medicare Part B, underscoring the importance of establishing AGD policy  
6 in 2018. The Board's adoption of this policy statement would enable the AGD and its  
7 Professional Relations Committee to use the summary as part of its talking points at the  
8 ADA HOD.

9  
10 **Cons:**

- 11 • If the AGD HOD opts not to consider this request in conjunction with the four policy  
12 positions already approved by the Board, then having multiple policies on dental benefits  
13 for the Medicare population may cause confusion.

14  
15 **Executive Director/CEO Recommendations:**

16 **From:** Max Moses

17 **Sent:** Wednesday, September 26, 2018 3:48 PM

18 **To:** Jeanie Kennedy <Jeanie.Kennedy@AGD.org>; Christa Ojeda <Christa.Ojeda@AGD.org>

19 **Cc:** Srinivasan Varadarajan <Srinivasan.Varadarajan@AGD.org>

20 **Subject:** RE: AIR on Medicare Policy

21  
22 I agree that this AIR should be discussed by the Board.

23  
24 Max G. Moses, JD, CPA, MBA

25 Executive Director

26 Academy of General Dentistry

27 560 W. Lake St., Sixth Floor

28 Chicago, IL 60661-6600

29 312.440.4303 Direct

30 888.AGD.DENT Main

31 888.243.7392 Exclusive AGD Leader Line

32 312.335.3438 Fax

33 [Max.Moses@agd.org](mailto:Max.Moses@agd.org)

34 [www.agd.org](http://www.agd.org)

35  
36  
37 **How It Fits into the Market Research:**

38 The Custom Study of Academy of General Dentistry (AGD) Members: Membership Benefits  
39 Survey (September 2012) (i.e., the Market Research) focused on member-facing programs.

40 While the present request does not fit neatly into the measurement targets of the Market  
41 Research, the present request is ultimately expected to strengthen our advocacy efforts. State  
42 Advocacy and Federal Advocacy were generally rated as high value, moderate satisfaction in the  
43 Market Research.

44  
45 **Does this conflict with the Constitution and Bylaws, an AGD HOD Policy or Board Policy?**  
46 **If yes, please provide the conflict and how you propose to resolve it:**

1 Yes, it conflicts with is AGD HOD 93:28-H-7 on health care reform criteria. However, the Board  
2 approved the rescission of this policy at their August 2018 meeting and it is pending a vote in the  
3 HOD. If the 2018 HOD accepts rescission of 93:28-H-7, this policy will not conflict with any  
4 AGD HOD Policy or Board Policy.  
5

6 **Responsible Staff Liaison & AGD member:**

7  
8 Jeanie Kennedy  
9 Manager, Dental Practice & Policy  
10 312.440.4347 – phone  
11 [jeanie.kennedy@agd.org](mailto:jeanie.kennedy@agd.org)  
12

13 Steven A. Ghareeb, DDS, FAGD  
14 Chair, Dental Practice Council  
15 304.744.3333 - p  
16 [sstevenamos@aol.com](mailto:sstevenamos@aol.com)  
17

18 **Suggested Council or Agencies to Complete Action:**

19 Dental Practice and LGA Councils, and the AGD HOD.  
20

21 **Suggested Councils or Agencies to be Involved in Collaboration:**

22 Dental Practice and LGA Councils, and the AGD HOD.  
23  
24

25 **Chair Approval Email:**

26  
27 **From:** Steven Ghareeb [mailto:sstevenamos@aol.com]  
28 **Sent:** Wednesday, September 26, 2018 3:57 PM  
29 **To:** Jeanie Kennedy <Jeanie.Kennedy@AGD.org>; battagja@prodigy.net; drbee35@gmail.com;  
30 rdgehrig@comcast.net; guyacheson@aol.com  
31 **Cc:** Srinivasan Varadarajan <Srinivasan.Varadarajan@AGD.org>  
32 **Subject:** Re: AIR on Medicare Policy Summary  
33

34 I approve!

35  
36 steven  
37

38 **From:** battagja [mailto:battagja@prodigy.net]  
39 **Sent:** Wednesday, September 26, 2018 9:04 PM  
40 **To:** Jeanie Kennedy <Jeanie.Kennedy@AGD.org>; Ghareeb, Steven A., DDS, FAGD  
41 <sstevenamos@aol.com>; Botko, Gerald J <drbee35@gmail.com>; Gehrig, Robert D., DMD, FAGD  
42 <rdgehrig@comcast.net>; guyacheson@aol.com  
43 **Cc:** Srinivasan Varadarajan <Srinivasan.Varadarajan@AGD.org>  
44 **Subject:** Re: AIR on Medicare Policy Summary

45  
46 I approve of the AIR  
47 JB

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**Division Coordinator Review Email:**

**From:** Gerald Botko [mailto:drbee35@gmail.com]  
**Sent:** Monday, October 01, 2018 8:49 AM  
**To:** Jeanie Kennedy <Jeanie.Kennedy@AGD.org>  
**Subject:** Re: FW: Final Reminder-- AIR on Medicare Policy Summary

I acknowledge the AIR.

**Board Liaison Review Email:**

**Emails sent to Drs. Gehrig and Acheson on 9/26, 9/27, 10/1. Awaiting responses.**

**CEO Review Email:**

**CFO Review Email:**

**From:** Christa Ojeda  
**Sent:** Wednesday, September 26, 2018 4:05 PM  
**To:** Jeanie Kennedy <Jeanie.Kennedy@AGD.org>; Max Moses <Max.Moses@AGD.org>  
**Cc:** Srinivasan Varadarajan <Srinivasan.Varadarajan@AGD.org>  
**Subject:** RE: AIR on Medicare Policy

I have reviewed the AIR and recommend it be sent to the Board.

**AIR Addendum – HOD Policy Change Request**

**Action:**            Add   X              Revise \_\_\_\_\_            Delete \_\_\_\_\_

**Existing Policy to Revise/Delete:**

As noted below, related AGD policy is AGD HOD 93:28-H-7 on health care reform criteria. The Board approved the rescission of this policy at their August 2018 meeting and it is pending in the HOD.

**Resolution Presented for Approval:**

**“Resolved, that AGD’s policy on dental benefits for the Medicare population include the following statement:**

**‘The Medicare program was established to provide medical benefits to the elderly U.S. population. Signed into law in 1965, the Medicare program has been amended numerous times since its inception. Some public health advocates and consumer groups seek to have dental benefits added into the Medicare Part B program. The Academy of General Dentistry (AGD) does not support this approach, as it believes that it is not a viable solution. Rather, the AGD supports free market-based private insurance solutions for dental benefits intended for the Medicare population.’”**

**Related Existing HOD Policies:**

The related AGD policy is AGD HOD 93:28-H-7 on health care reform criteria. The Board has already approved the rescission of this policy at their August 2018 meeting.

Additionally, at the 2017-2018 Board Meeting III and July 2018 Zoom call, the Board approved four Medicare positions.

**Are existing AGD policies inadequate or no longer appropriate? Explain.**

Staff is conducting a thorough review of the HOD Policy Manual to ensure that AGD policies remain relevant, current, and appropriate. With the approval of the Medicare positions and preamble, the AGD will have up-to-date Medicare positions.

**For additions/revisions, how often should this policy be reviewed? [Default is every 5 years]**

Every 5 years.

**Any documentation or literature considered in developing this submission?**

Yes, staff conducted extensive research for several months prior to the development of the preamble and policy positions.

**Other Comments?**



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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

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

**Resolution 201**

<p><b>“Resolved that Policy 2015:309-H-6 be amended as follows.</b></p> <p><b>2015:309-H-6      <del>“Resolved, that HOD Policy 2014:107-H-6 be amended to read:</del></b></p> <p><b><del>“Resolved, that the AGD take advantage of super saver and other discounted airfares whenever possible in scheduling meetings and be it further</del></b></p> <p><b>Resolved, that officers, members of the Board, Council and Committee be encouraged to take advantage of super saver airfares by:</b></p>
---



- 1 ~~1. Offering an extra per diem to an individual staying over on a Saturday night when~~  
2 ~~the savings in airfare more than compensates for it.~~  
3  
4 ~~2. Holding Board Meetings within the continental United States in locations where~~  
5 ~~Board members can be encouraged to stay over on a Saturday night to obtain a~~  
6 ~~super saver airfare, and be it further~~  
7  
8 "Resolved, that all Council and Committee Meetings be held in Chicago except for:  
9  
10 1. Meetings of the ~~Annual Meetings Council~~ Scientific Meeting Council which may be  
11 held at sites selected for ~~Annual~~ Scientific Meetings to be held within three years.  
12  
13 2. Such other meetings as the President may deem necessary which have to be moved  
14 to a location outside of Chicago because of justifiable logistical reasons, where the  
15 total cost of the airfare will be less or not appreciably more than it would have been  
16 held in Chicago.  
17  
18 3. Any meeting held in conjunction with the AGD's Annual or Scientific Meeting.  
19  
20 4. Any meeting held in conjunction with the American Dental Association's Annual  
21 Meeting."

22  
23 Resolution 202  
24

25 *If Resolution 202 is adopted, Resolution 203 will be ruled moot.*  
26

27 "Resolved, that the Lifelong Learning & Service Guidelines be amended to read:  
28

29 **Lifelong Learning & Service Recognition Recipient Award Guidelines**  
30

31 *Why Achieve Recognition?*

32 **Lifelong Learning & Service Recognition (LLSR) is a program of formal recognition for**  
33 **Academy of General Dentistry (AGD) Masters in the areas of continuing education, dental-**  
34 **related community service and service to organized dentistry. It is not a credential and in**  
35 **no way may be represented to the public as such. LLSR was created to recognize the**  
36 **achievements of those AGD Masters who clearly recognize the professional obligation to**  
37 **remain current in their profession and to create an example so that each member of the**  
38 **dental profession never loses sight of this obligation. Achieving the LLSR from the AGD**  
39 **tells colleagues and patients of your continued commitment to lifelong learning and quality**  
40 **patient care. A Master may receive LLSR multiple times, in a sequential manner, as long as**  
41 **all requirements are met. Once a Master is first recognized by this achievement,**  
42 **subsequent recognitions may include only those credits and points earned since the date of**  
43 **the previous LLSR recognition.**  
44

45 *A Charge to all Masters*

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

- 50 **1) Continue their commitment to lifelong learning**

- 1 ~~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 year a member is approved to receive AGD Mastership 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 receive the award. Successful candidates are allowed three years following approval to  
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  
36 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:

- 38 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

43 2) Credits for course attendance, teaching or publications must be in at least eight (8) of the  
44 following disciplines, although there are no minimums or maximum by discipline. Note: No  
45 credits will be accepted for advanced academic education programs, such as residencies or  
46 advanced degree programs.  
47

1	Subject Category	Subject Code
2	Basic Science	010
3	Endodontics	070
4	Electives	130
5	Myofacial Pain/ Occlusion Orofacial Pain*	200
6	Operative Dentistry	250
7	Oral/Max Surgery	310
8	Anes/Pain Mgmt/Pharm*	340
9	Orthodontics	370
10	Pediatrics	430
11	Periodontics	490
12	Practice Mgmt	550
13	Fixed Prosth	610
14	Removable Prosth	670
15	Implants	690
16	Oral Med/Oral Dx	730
17	Special Pt Care	750
18	Esthetics	780

19  
20  
21 *\*These changes go into effect January 1, 2019. Any member that has not achieved or applied*  
22 *for Fellowship, Mastership, or LLSR by December 31, 2016, will be expected to meet the*  
23 *updated continuing education requirements at that time.*  
24

25 **Teaching and Publication Credit**

26 1) Full or part-time faculty positions in ADACODA/CDA-accredited institutions are  
27 eligible for up to ten (10) credit hours each year. Verification of teaching appointments is  
28 required from each institution and should be included with the application.

29 2) Teaching continuing dental education courses for organizations that are approved by  
30 AGD-PACE, or ADA-CERP or an ~~AGD constituent~~ are eligible for credit. Verification is  
31 required that indicates the dental discipline and the number of hours. Credit will be given  
32 hour-for-hour for each presentation.

33 3) The publication of a scientific article, case report, technique paper or clinical research  
34 report in a scientific journal or textbook is worth ten (10) credit hours. A copy of the  
35 articles, with dates of publication, should be submitted with the application.  
36

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

38 1) One community service point is equal to one hour of dental-related volunteer community  
39 service. The Dental Education Council will determine which additional categories of service  
40 not described in these guidelines may be eligible. Volunteer work for a for-profit  
41 organization, such as a dental manufacturer, is not eligible.

42 2) To document dental-related community service, a representative of the organization for  
43 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.

1 3) No financial remuneration or “in-kind” remuneration may be received for  
2 service/volunteer work. Reimbursement of expenses such as airfare, transportation, meals,  
3 etc., is allowed.  
4

5 Categories of dental-related community and volunteer service may include, but are not  
6 limited to:

- 7 a. Providing pro bono dental services through a not-for-profit organization;
- 8 b. Mentoring a dental 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 dental-related 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;
- 18 i. Volunteer work at a local or national dental meeting, such as working at the  
19 organization’s booth;
- 20 j. Serving as an unpaid team dentist for a school, college, professional sports team or youth  
21 athletic association;
- 22 k. Instituting a mouth guard program for a school, college, professional sports team or  
23 youth athletic association;
- 24 l. Providing dental education programs at elementary or secondary schools;
- 25 m. Volunteering as a Boy/Girl Scout merit badge leader for dental health.  
26

27 *Service to Organized Dentistry:*

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

31 1) A maximum of 12 points may be earned annually for serving in a national position in a  
32 dental organization. Service time of less than one year will be prorated by month. Holding  
33 multiple positions at the national level in the same organization is acceptable only up to the  
34 12-point limit each year.

35 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  
37 year will be prorated by month. Holding multiple positions in the same local organization is  
38 acceptable only up to the 12-point limit each year.

39 3) To document service to organized dentistry, a representative of the organization for  
40 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.  
43

44 *Application Procedures and Deadline*

45 1) All LLSR requirements must be completed by the December 31 application deadline to  
46 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.**

6 **3) Only the Dental Education Council may determine the acceptability of LLSR**  
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  
12 **4) Acceptance or denial will be communicated to applicants following review of the**  
13 **application by the Dental Education Council. All decisions of the council are final.**

14  
15 **5) Recipients are required to attend the annual Convocation ceremony held during the**  
16 **AGD scientific sessions to receive the award. Successful candidates are allowed three years**  
17 **following approval to attend convocation and received their award. Additional recognition**  
18 **of LLSR recipients may occur at the constituent or regional levels and thorough AGD**  
19 **publications.**

20  
21  
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 AGD House Policy 2000:9-H-7 Advertising FAGD/MAGD Credentials be**  
37 **modified to allow AGD members to advertise the LLSR Award as a Credential, similar to**  
38 **the FAGD/MAGD.**

39  
40 **Advertising FAGD/MAGD/LLSR Credentials**

41  
42 **Fellow, ~~or~~ Master, or Lifelong Learning & Service Recipient of the Academy of General**  
43 **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 \_\_\_\_\_, DDS, BDS, or DMD, FAGD, ~~or~~ MAGD, or LLSR  
2 Fellow, or Master or Lifelong Learning & Service Recipient of the Academy of General  
3 Dentistry  
4

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,

16 Resolved that House Policy 81:12-H-7 Defending their capabilities to render dental  
17 procedures be modified to read:  
18

19 Resolved, that members faced...

20 C. Verification that the individual has achieved Fellowship, ~~or~~ Mastership, or Lifelong  
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,  
2

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 Learning & Service Recipient 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

15 And be it further,  
16

17 Resolved that House Policy 78:19-H-6 Changes in, be modified to read:  
18

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,  
25

26 Resolved, that House Policy 2003:3-H-7 Lifelong Learning and Service ~~Recognition~~  
27 Recipient Program be modified to read:  
28

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  
39 *If Resolution 202 is adopted, Resolution 203 will be ruled moot.*  
40

41 “Resolved, that the Lifelong Learning & Service Guidelines be amended to read:  
42

43 Lifelong Learning & Service Recognition Guidelines  
44

45 *Why Achieve Recognition?*

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-

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

### 11 *A Charge to all Masters*

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

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

### 20 *LLSR Requirements*

- 21 1) All applicants must be AGD Masters, with AGD membership in good standing at the  
22 time of application and when recognition is received.
- 23 2) 500 credit hours are required in course attendance, teaching or publications earned since  
24 the date Mastership was received ~~or since a previous LLSR was received~~. A breakdown of  
25 these credits can be found below in the Course Attendance section.
- 26 3) Completion of 100 hours of AGD-approved dental-related community/volunteer service  
27 and/or service to organized dentistry is required. Hours must have been performed since  
28 the date Mastership was received ~~or since a previous LLSR was received~~. The acceptability  
29 of points is subject to review by the Dental Education Council. Examples of acceptable  
30 dental-related volunteer service can be found below in the Community and Volunteer  
31 Service section.
- 32 4) An application must be submitted with the designated application processing fee, which  
33 is determined annually by the Dental Education Council. This fee covers direct costs, plus  
34 \$100 for overhead costs. Applications must be postmarked by December 31.
- 35 5) Acceptance or denial will be communicated to applicants following review of the  
36 application by the Dental Education Council. All decisions of the council are final. In  
37 addition to recognition on a national level, additional recognition of LLSR recipients can  
38 also will be at the constituent and/or regional level and through AGD publications.  
39 Recipients will be ~~invited~~ requested to be present and attend the Convocation Ceremony  
40 where they will be celebrated by inclusion of their names in the Convocation program.  
41 Recipients will be seated in a designated area and will walk across the stage to be honored,  
42 and have each of their names read, ~~prior to~~ following the FAGD and MAGD awardees.”

### 43 *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 for non-participation credits. Note: No credits will be accepted for advanced academic education programs, such as residencies or advanced degree programs.

Subject Category	Subject Code
Basic Science	010
Endodontics	070
Electives	130
Myofacial Pain/ Occlusion Orofacial Pain*	200
Operative Dentistry	250
Oral/Max Surgery	310
Anes/Pain Mgmt/Pharm*	340
Orthodontics	370
Pediatrics	430
Periodontics	490
Practice Mgmt	550
Fixed Prosth	610
Removable Prosth	670
Implants	690
Oral Med/Oral Dx	730
Special Pt Care	750
Esthetics	780

~~\*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.~~

#### 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.

1 **3) The publication of a scientific article, case report, technique paper or clinical research**  
2 **report in a scientific journal or textbook is worth ten (10) credit hours. A copy of the**  
3 **articles, with dates of publication, should be submitted with the application.**  
4

#### 5 **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**  
11 **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)**  
13 **provided. If additional verification is needed, please attach necessary documentation to this**  
14 **form.**

15 **3) No financial remuneration or “in-kind” remuneration may be received for**  
16 **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;**

21 **b. Mentoring a student, emerging dentist or struggling colleague, through a recognized**  
22 **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**  
27 **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;**

31 **i. Volunteer work at a local or national dental meeting, such as working at the**  
32 **organization’s booth;**

33 **j. Serving as an unpaid team dentist for a school, college, professional sports team or youth**  
34 **athletic association;**

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

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

38 **m. Volunteering as a Boy/Girl Scout merit badge leader for dental health.**  
39

#### 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**  
45 **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."  
46

47 **Resolution 204**

1  
2 **“Resolved, that HOD Policy 2014:105R-H-6 be rescinded.**

3  
4 ~~2014:105R-H-6 “Resolved, that the Meeting Services Guidelines Scientific Session Fees~~  
5 ~~Annual Meetings Council be amended to read~~

6  
7 ~~Scientific Session Fees Annual Meetings Council~~

8  
9 ~~AGD member dentist registrants who purchase tickets for scientific sessions and then find~~  
10 ~~that they are elevated to delegate or alternate delegate status may obtain a full refund of~~  
11 ~~their scientific session ticket(s)~~

12  
13 **REFUNDS FOR TICKETS PURCHASED**

14  
15 ~~Cancellation requests received less than 30 days prior to the first official day of the annual~~  
16 ~~meeting, with the exception of AGD member dentist registrants who have been elevated to~~  
17 ~~delegate or alternate delegate status, will not be eligible for a credit or refund.~~

18  
19 **And be it further,**

20  
21 **Resolved, that the Board Policy Manual be amended to include Policy Type: VI. Board**  
22 **Guidelines, E. Scientific Session Refunds**

23  
24 **AGD member dentist registrants who purchase registration and/or tickets for the Scientific**  
25 **Session may obtain a refund of that purchase, less a processing fee, up to 30 days before the**  
26 **first day of the Session. AGD member dentist registrant refund requests will incur a \$50**  
27 **processing fee. Guest registrant refund requests will incur a \$15 processing fee. Requests**  
28 **received less than 30 days before the first day of the Session will not be eligible for a credit**  
29 **or refund.**

30  
31 **Monitoring: Review by Board annually in April**

32  
33 **Resolution 205**

34  
35 **“Resolved, that the Board Policy Manual (BPM) be amended at Policy Type: II.**  
36 **Governance Process, M., Section 2., Examinations Council to read:**

37  
38 **E. Examinations Council**

39  
40 **1. The Examinations Council shall consist of six (6) members, including the chairperson,**  
41 **the chairs of the ~~Fellowship Exam Committees (A, B, and C)~~, Examination Development**  
42 **Committee, Examination Assessment Committee and Examination Materials Committee,**  
43 **chair of the Self-Instruction Committee, and one (1) other members who has ~~have~~ served at**  
44 **least one (1) term on the Examination Council or Self-Instruction Committee. All members**  
45 **of the council must and each of whom have achieved Fellowship or Mastership status**  
46 **within the organization.**  
47

1 **2. It shall be the duty of the council:**

2  
3 **a. To be responsible for overseeing the construction, administration, scoring, and security**  
4 **of the Fellowship Examination;**

5  
6 **b. To help develop and administer, in conjunction with the ~~Examination Committees~~**  
7 **Examination Development Committee, Examination Assessment Committee and**  
8 **Examination Materials Committee, any other examination, quizzes, or instruments of**  
9 **measurement when so directed by the HOD, or Board;**

10  
11 **c. To audit the Fellowship Review Course annually to ensure the quality of the course**  
12 **materials is consistent with the overall premise of the Fellowship Examination;**

13  
14 **d. To recommend and enforce policies pertaining to examinations for which it is**  
15 **responsible.**

16  
17 **e. To evaluate the quality and effectiveness of *General Dentistry's* Self-Instruction**  
18 **program once a year.**

19  
20 **3. To adhere to the Sunset Review Process and Schedule outlined in Policy Type V.: Board**  
21 **Policy Statements.**

22  
23 **4. A quorum of the council and the examination committees~~exam teams~~ shall be a majority**  
24 **of members present.**

25  
26 **5. Each Council and Committee shall evaluate the revenues and expenses pricing of all its**  
27 **programs and services annually as part of the budget process. Additionally, each Council and**  
28 **Committee shall provide a complete revenue and expense analysis to the Board at Board**  
29 **Meeting IV at least every three years, beginning 2019.**

30  
31 **6. AGD staff will send out to each council, committee, or other agency member along with**  
32 **any member collaborating on any AGD business the Code of Conduct form to be**  
33 **completed by said individual at the beginning of each governance year. Each covered**  
34 **individual will submit to their staff liaison an accurately completed form, including**  
35 **particular attention paid to any companies that may have remunerated said covered**  
36 **individual and subsequently reported such remuneration to the federal government's**  
37 **reporting structure under the Sunshine Act. The staff liaison will compile all of their**  
38 **individual's forms, and share them with their chairperson and also the executive office**  
39 **staff, who will in turn, forward them to the Audit Committee for further review.**

40  
41 **And be it further:**

42  
43 **Resolved, that the Board Policy Manual (BPM) be amended at Policy Type: II.**  
44 **Governance Process, M., Section 3H, Examinations Items Bank Committee (Team C) to**  
45 **read:**

46  
47 **~~H. Examinations Items Bank~~ Materials Committee (~~Team C~~)**

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

7  
8 **Committee members shall serve no more than two (2) consecutive three (3) year terms on**  
9 **the committee;**

10  
11 **2. It shall be the duty of the committees:**

12  
13 **a. To ensure that each item in the item bank is appropriately and consistently categorized**  
14 **in accordance with the examination content outline;**

15  
16 **b. To review periodically the content outline for the Fellowship Examination and**  
17 **recommend changes in the outline to the council;**

18  
19 **c. To develop the Fellowship Examination Study Guide annually per the established**  
20 **development guidelines set forth by the council;**

21  
22 **3. To adhere to the Sunset Review Process and Schedule outlined in Policy Type V.: Board**  
23 **Policy Statements.**

24  
25 **4. Each Council and Committee shall evaluate the revenues and expenses pricing of all its**  
26 **programs and services annually as part of the budget process. Additionally, each Council and**  
27 **Committee shall provide a complete revenue and expense analysis to the Board at Board**  
28 **Meeting IV at least every three years, beginning 2019.**

29  
30 **5. AGD staff will send out to each council, committee, or other agency member along with**  
31 **any member collaborating on any AGD business the Code of Conduct form to be**  
32 **completed by said individual at the beginning of each governance year. Each covered**  
33 **individual will submit to their staff liaison an accurately completed form, including**  
34 **particular attention paid to any companies that may have remunerated said covered**  
35 **individual and subsequently reported such remuneration to the federal government's**  
36 **reporting structure under the Sunshine Act. The staff liaison will compile all of their**  
37 **individual's forms, and share them with their chairperson and also the executive office**  
38 **staff, who will in turn, forward them to the Audit Committee for further review.**

39  
40 **And be it further:**

41  
42 **Resolved, that the Board Policy Manual (BPM) be amended at Policy Type: II.**  
43 **Governance Process, M., Section 3 I. Fellowship Exam Committee (Teams A and B) to**  
44 **read:**

45  
46 **I. ~~Fellowship Exam Committee (Teams A and B)~~ Examination Development Committee**  
47

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

5  
6 **Those committee members who are not members of the Examinations Council shall serve**  
7 **no more than two (2) consecutive three- (3) year terms on the committee;**

8  
9 **2. It shall be the duty of the committee:**

10  
11 **a. To construct, ~~review,~~ and score the Fellowship Examination;**

12  
13 **b. To make recommendations for an official passing score, based on the statistical**  
14 **analyses, for the annual Fellowship Examination to the Examinations Council;**

15  
16 **c. To maintain an adequate pool of examination items that can be utilized for the**  
17 **Fellowship Examination.**

18  
19 **3. To adhere to the Sunset Review Process and Schedule outlined in Policy Type V.: Board**  
20 **Policy Statements.**

21  
22 **4. Each Council and Committee shall evaluate the revenues and expenses pricing of all its**  
23 **programs and services annually as part of the budget process. Additionally, each Council and**  
24 **Committee shall provide a complete revenue and expense analysis to the Board at Board**  
25 **Meeting IV at least every three years, beginning 2019.**

26  
27 **5. AGD staff will send out to each council, committee, or other agency member along with**  
28 **any member collaborating on any AGD business the Code of Conduct form to be**  
29 **completed by said individual at the beginning of each governance year. Each covered**  
30 **individual will submit to their staff liaison an accurately completed form, including**  
31 **particular attention paid to any companies that may have remunerated said covered**  
32 **individual and subsequently reported such remuneration to the federal government's**  
33 **reporting structure under the Sunshine Act. The staff liaison will compile all of their**  
34 **individual's forms, and share them with their chairperson and also the executive office**  
35 **staff, who will in turn, forward them to the Audit Committee for further review.**

36  
37 **IJ. ~~Fellowship Exam Committee (Teams A and B)~~ Examination Assessment Committee**  
38

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

43  
44 **Those committee members who are not members of the Examinations Council shall serve**  
45 **no more than two (2) consecutive three- (3) year terms on the committee;**

46  
47 **2. It shall be the duty of the committee:**

1  
2 a. ~~To construct, review, and score~~ To review the preliminary and approve the final  
3 version of the Fellowship Examination;  
4

5 b. ~~To make recommendations for an official passing score, based on the statistical~~  
6 ~~analyses, for the annual Fellowship Examination to the Examinations Council~~ To review all  
7 course materials for the Fellowship Review Course annually;  
8

9 c. To maintain an adequate pool of examination items that can be utilized for the  
10 Fellowship Examination.  
11

12 3. To adhere to the Sunset Review Process and Schedule outlined in Policy Type V.: Board  
13 Policy Statements.  
14

15 4. Each Council and Committee shall evaluate the revenues and expenses pricing of all its  
16 programs and services annually as part of the budget process. Additionally, each Council and  
17 Committee shall provide a complete revenue and expense analysis to the Board at Board  
18 Meeting IV at least every three years, beginning 2019.  
19

20 5. AGD staff will send out to each council, committee, or other agency member along with  
21 any member collaborating on any AGD business the Code of Conduct form to be  
22 completed by said individual at the beginning of each governance year. Each covered  
23 individual will submit to their staff liaison an accurately completed form, including  
24 particular attention paid to any companies that may have remunerated said covered  
25 individual and subsequently reported such remuneration to the federal government's  
26 reporting structure under the Sunshine Act. The staff liaison will compile all of their  
27 individual's forms, and share them with their chairperson and also the executive office  
28 staff, who will in turn, forward them to the Audit Committee for further review.  
29

30 And be it further,  
31

32 Resolved that all subsequent committee charges be renumbered appropriately in the Board  
33 Policy Manual.  
34

35 And be it further,  
36

37 Resolved, that the Board Policy Manual (BPM) be amended at Policy Type: II. Governance  
38 Process, H. Division Coordinator Duties be amended to read:  
39

40 ...  
41

42 Continuing Education Division

- 43 • Dental Education Council
- 44 • 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



- 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**

16 Credentials and Elections Committee

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  
31 1. The incoming President will send a letter in April to all Constituent Presidents,  
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  
38 Examination Council shall not be counted a second time if also serving on ~~Exam~~  
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  
47 CHAPTER XIII, Divisions, Councils and Committees

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**Section 2. Each of the following councils and committees shall be assigned to the following Divisions:**

...

**C. Continuing Education Division**

...

**4. Examinations Council**

**a. Examination Assessment Committee**

**b. Examination Development Committee**

**c. Examination Materials Committee**

**d. Self Instruction Committee**

**~~a. Examinations Item Bank Committee (Team C)~~**

**~~d. Fellowship Examination Committee (Teams A & B)”~~**



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Reports to be reviewed by the

Reference Committee on  
**Administration, Image & Membership**

Friday, November 2, 2018

2:30 p.m.

Room S102BCD – McCormick Place Convention Center

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

25

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38

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.**

1 **Goals**

2  
3 General dentists provide superior patient clinical outcomes.

4 **High-Level Strategy**

5  
6 To achieve these goals, AGD will do the following:

- 7 • **Continuing Education** - Deliver multi-channel continuing dental education through AGD,  
8 AGD Constituents or other AGD collaborative relationships.  
9
- 10 ○ Provide a portfolio of online or web-based offerings to make CE accessible and affordable.
- 11 ○ Explore direct-to-member CE facilitated by AGD for instances where constituent-led CE is  
12 not viable.
- 13 ○ Support constituent led CE including the development of efforts to provide high quality  
14 education.
- 15
- 16 • **Expanded educational recognition opportunities** – Create more opportunities to receive  
17 recognition for continuing education.  
18
- 19 • **Micro-education** - AGD will explore developing micro-education to specifically address key  
20 clinical training meeting applicable licensure or AGD credentialing requirements.

21 **Practice Leadership and Support**

22  
23 **Creates new initiatives to help AGD members lead more financially successful practices by**  
24 **providing practice leadership education and business support.**

25 **Goals**

26  
27 AGD members lead or work in successful practices with positive business and clinical outcomes.

28 **High-Level Strategy**

29  
30 To achieve these goals, AGD will do the following:

- 31 • **Improve Dental Practice Leadership** – Educate and train dental practice leaders on  
32 effective practice management and leadership techniques. Activities include, but are not  
33 limited to, the following.  
34
- 35 ○ Create robust practice management education providing practice leaders with critical  
36 business and leadership resources.
- 37 • **Help Dental Students and Residents** – Lead efforts helping students and residents manage  
38 financial impact of their education through best practices.
- 39 • **Improve Practice Performance** – Make available national buying program or direct  
40 supplier negotiation providing discounts on practice supplies, equipment and other services.  
41 Activities include, but are not limited to, the following.  
42
- 43 ○ Investigate developing an expanded portfolio of direct practice services (billing, EHR, legal)  
44 designed to provide AGD members with vetted, trusted and useful practice management and  
45 leadership assistance.  
46

- 1 ○ Investigate direct negotiations with high quality dental practice suppliers to provide for cost  
2 savings or service improvements to AGD dentists and their practice.  
3

4 **Public and Policy Advocacy**  
5

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

9 **Goals**  
10

11 Patients will seek out AGD members or member led practices.  
12

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

15 **High-Level Strategy**  
16

17 To achieve these goals, AGD will do the following:

- 18 • **Increase Patients** – Promoting efforts highlighting the clinical differentiation between AGD  
19 members and other oral care options.  
20 • **Educate Policy Makers** – Educate policy makers on the positive patient clinical outcomes of  
21 dentist led general dentistry practices.  
22 • **Advocate for the Dental Home Concept** - AGD will identify and implement strategies to  
23 educate policy makers and the public on the value of the dentist led Dental Home Concept.  
24

25 **And be it further,**  
26

27 **Resolved, that the Strategic Plan Synopsis be employed as the primary document for public**  
28 **dissemination and distribution.**  
29

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

32 The Academy of General Dentistry (AGD) recognizes that current and future dentists will  
33 practice in a dynamic and evolving world. It is a priority of the AGD to prepare and support  
34 general dentists, regardless of their personal goals, career path or practice setting, to be  
35 successful within this environment. As a result, the AGD Strategic Plan is designed to outline  
36 high level goals and strategies to focus AGD efforts to support general dentistry.  
37

38 The AGD Strategic Plan is inclusive of all individuals considering, practicing or supporting the  
39 practice of general dentistry and who share AGD members' commitment to high quality patient  
40 outcomes and a life-long commitment to learning. The following summarizes key elements of  
41 the AGD Strategic Plan.  
42

43 The AGD Strategic Plan through its Vision and Mission reiterates members' Visionary  
44 commitment to *oral health and better lives because of the Academy of General Dentistry* through  
45 its continuing Mission of *advancing general dentistry and oral health through quality education*  
46 *and advocacy.*  
47

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

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

10  
11 **Resolved, that HOD Policy 2015:102-H-6, the 2015-2018 AGD Strategic Plan be rescinded,**  
12 **effective December 31, 2018:**

13 **~~2016-2018 Strategic Plan~~**

14  
15 **~~Goal 1—Education: Become the most valued resource of quality continuing dental~~**  
16 **~~education for general dentists at all stages of their career.~~**

17  
18 **~~Strategy 1: Create a Scientific Session that will annually attract at least 25% of AGD members~~**  
19 **~~by the end of 2018.~~**

20  
21 **~~Strategy 2: Facilitate education programs that promote members' success and advancement~~**  
22 **~~through all stages of their dental career using traditional as well as innovative, cutting edge~~**  
23 **~~methods.~~**

24  
25 **~~Strategy 3: Partner with AGD constituents in the development and delivery of continuing~~**  
26 **~~education programs.~~**

27  
28 **~~Strategy 4: Protect PACE and increase the number of PACE providers.~~**

29  
30 **~~Goal 2—Advocacy: Strengthen and protect the general dentistry profession and the oral~~**  
31 **~~health of the public.~~**

32  
33 **~~Strategy 1: Represent the unique interests of general dentists in all advocacy arenas.~~**

34  
35 **~~Strategy 2: Advocate on behalf of the general dentistry profession as relates to policy making,~~**  
36 **~~insurance, licensing, education, and all levels of government.~~**

37  
38 **~~Strategy 3: Advocate on behalf of the public to ensure safe, best quality dentistry practices and~~**  
39 **~~appropriate access to care.~~**

40  
41 **~~Strategy 4: Develop strong working relationships where appropriate with the AGD~~**  
42 **~~constituents, the ADA, and dental specialty organizations in addressing issues of common~~**  
43 **~~interest.~~**

44  
45 **~~Strategy 5: Pursue instruments and resources to empower the AGD's advocacy agenda.~~**  
46

1 **Goal 3 – Membership: Achieve a 25% increase in full-dues-equivalent members and**  
2 **student members by the end of 2018.**

3  
4 *Strategy 1: Utilize market and member research to determine which current and new member*  
5 *benefits will best serve AGD in attracting and retaining members.*

6  
7 *Strategy 2: Provide and promote products and services that meet the current and future needs*  
8 *of members and prospective members in all stages of practice and career paths.*

9  
10 *Strategy 3: Achieve at least a 10% increase in members' assessments of AGD value by the end*  
11 *of 2018.*

12  
13 *Strategy 4: Actively recruit dental student members and retain them when they become*  
14 *practicing dentists.*

15  
16 *Strategy 5: Attract non-member general dentists by promoting the value of a lifelong learning*  
17 *mindset.*

18  
19 **Goal 4 – Communications: Promote the AGD as an organization dedicated to advancing**  
20 **general dentistry through quality continuing education and advocacy.**

21  
22 *Strategy 1: Position the AGD as the leading source of information on oral health issues for*  
23 *general dentistry.*

24  
25 *Strategy 2: Create and promote a consistent AGD brand that is applied to all marketing*  
26 *vehicles and collateral materials.*

27  
28 *Strategy 3: Increase public awareness of the value AGD general dentists bring as gatekeepers*  
29 *to oral health.*

30  
31 *Strategy 4: Focus communication efforts on engaging members to advocate on behalf of*  
32 *general dentistry.*

33  
34 *Strategy 5: Enhance AGD publications and digital-based communication vehicles to*  
35 *effectively communicate to all AGD stakeholders.*

36  
37 **Goal 5 – Organizational Excellence: Ensure that the AGD is financially viable, functions**  
38 **efficiently in a cost-effective manner, and has a mutually supportive relationship with its**  
39 **constituents.**

40  
41 *Strategy 1: Ensure the fiscal soundness of AGD.*

42  
43 *Strategy 2: Improve the effectiveness and efficiency of AGD headquarters operations.*

44  
45 *Strategy 3: Streamline the AGD governance structure and operations.*  
46

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

3  
4 *Strategy 5: Ensure the success of constituents in meeting the needs of grassroots members.”*

5  
6 **Resolution 102**

7  
8 “Resolved, that national AGD should contribute to each region with a dental school the  
9 sum of \$2000 for each school for the purpose of cultivating student activity and  
10 participation with that region. This will include dental education, social events, and  
11 integration with region’s governance. And be it further,

12  
13 Resolved, that \$152,000 be allocated from the 2019 Contingency Fund (76 schools x \$2000.”

14  
15 **Resolution 103**

16  
17 “Resolved, that effective starting with the 2020 fiscal year, the Academy of General  
18 Dentistry forward 100% of student member dues to the respective constituent or  
19 component that financially supports the Student Chapter.”

20  
21 **Resolution 104**

22  
23 “Resolved, that effective starting with the 2020 fiscal year, the Academy of General  
24 Dentistry waive annual membership dues for two (2) faculty members for each Student  
25 Chapter.”

26  
27 **Resolution 150**

28  
29 “Resolved, that the 2019 Budget with Revenues of \$14,839,221 and Expenses of \$14,839,221  
30 netting out to 0 Net Loss from Operations with a Contingency of \$123,497 and capital  
31 budget of \$481,522 be approved. And be it further,

32  
33 Resolved, that House Policy 2017:150S4-H-11 be rescinded.

34  
35 ~~2017:150S4-H-11 “Resolved, that the 2018 budget with Net Income from Operations of \$0~~  
36 ~~pre-spending and \$0 post-spending and a capital budget of \$89,500 be approved.~~

37  
38 ~~And be it further, resolved, that the budget be amended to include a \$3 increase in student~~  
39 ~~dues and be it further resolved that the contingency fund be reduced by \$34,420.~~



1 Resolution 102

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 II 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  
21 **Budget Ramifications:**

22  
23 **Action/Timeline:** 2018 HOD

24  
25 **How It Fits into the Strategic Plan:**

26 Strategic Plan:

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

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

30  
31 **How it Fits into the Corporate Objectives:**

32 8. AGD Student Chapters – By December 31, 2018, have AGD Student Chapters registered at 85% of  
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?  
46 • 3) Should we only subsidize those schools that we have a relationship with?

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  
11 **Executive Director/CEO Recommendations:**

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  
36 [Max.Moses@agd.org](mailto:Max.Moses@agd.org)  
37 [www.agd.org](http://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?**

44 **If yes, please provide the conflict and how you propose to resolve it:**

- 45 • No

46  
47 **Responsible Staff Liaison & AGD member:**

1 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

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  
23

24 **From:** Christa Ojeda

25 **Sent:** Tuesday, October 02, 2018 3:50 PM

26 **To:** Max Moses <Max.Moses@AGD.org>; Jennifer Goler <jennifer.goler@agd.org>; Brian  
27 Ciporin <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  
44 312.440.4315 (Direct)  
45 888.AGD.DENT (Main)  
46 [christa.ojeda@agd.org](mailto:christa.ojeda@agd.org)  
47

**AIR Addendum – HOD Policy Change Request**

**Action:**        Add \_\_\_\_\_  \_\_\_\_\_ **Revise** \_\_\_\_\_ **Delete** \_\_\_\_\_

**Existing Policy to Revise/Delete:**

None

**Resolution Presented for Approval:**

**“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.”**

**Related Existing HOD Policies:**

None known of

**Are existing AGD policies inadequate or no longer appropriate? Explain.**

No

**For additions/revisions, how often should this policy be reviewed? [Default is every 5 years]**

Every five years

**Any documentation or literature considered in developing this submission?**

**2016-2018 STRATEGIC PLAN : Goal 3 (Strategy 3 and 4)**

**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.**

**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.**

**Other Comments?**

**From the 2018 Membership Value Survey:**

**By continuing the positive relationship fostered through the AGD Student Chapter, and increasing practical advice and counsel to a newly practicing dentist, the AGD increases the conversion rate of Student Members to AGD Dentist Member.**

**Once a positive awareness of general dentistry has been created, specific tactics designed to encourage high-quality dentistry as their profession becomes important.**

1 **Resolution 103**

2  
3 **“Resolved, that effective starting with the 2020 fiscal year, the Academy of General**  
4 **Dentistry forward 100% of student member dues to the respective constituent or**  
5 **component that financially supports the Student Chapter.”**

6  
7 **AGD Financial Support of AGD Student Chapters**

8  
9 **Prepared by:** Texas AGD

10  
11 **Date of Report:** 8/15/2018

12  
13 **Staff Resources:**

14  
15 **Total Financial Cost:**

16  
17 **Budget Ramifications:**

18  
19 **Action/Timeline:** Submission to the 2018 House of Delegates to become effective in fiscal year  
20 2020

21  
22 **How It Fits into the Strategic Plan:**

23 **Goal 1—Education:** Become the most valued resource of quality dental continuing education  
24 for general dentists at all stages of their career.

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

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

- 30 • *Through FellowTrack (FT) programs, the Texas AGD, Houston AGD, Dallas AGD, and*  
31 *San Antonio AGD already partner with AGD to deliver monthly continuing education*  
32 *programs throughout the school year to the respective AGD Student Chapters. This is*  
33 *the hands-on aspect of the partnership. Currently, the entire financial burden of running*  
34 *these programs falls to the state and local AGD levels.*
- 35 • *Through financial support of Student Chapters, AGD fully honors its commitment to*  
36 *partner with constituents and/or components to facilitate educational programs for*  
37 *student members. Student Chapters provide their members critical first-impression*  
38 *experiences that validate and solidify the perception that AGD is a trusted and vital*  
39 *resource for quality continuing education.*

40  
41 **Goal 3—Membership:** Increase the number of full-dues equivalent members to 27,000 and  
42 retain the existing marketshare of United States members by the end of 2018; whereby the  
43 ‘existing marketshare’ was the marketshare as of December 31, 2015.

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

- 1       • *Student Chapters, at their foundation, represent an AGD product/service that is geared*  
2       *toward meeting the needs of students at the pre-professional stage of their career path.*  
3       *Helping to financially support them is also helping to “provide and promote” them.*

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

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

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

14  
15       Goal 5—Organizational Excellence: Ensure that the AGD is financially viable, functions  
16       efficiently in a cost-effective manner, and has a mutually supportive relationship with its  
17       constituents.

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

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

27  
28       **How it Fits into the Corporate Objectives:**

29       Membership – Increase the number of “full dues-equivalent” members to 27,000 by the end of  
30       2018; increase existing market share of US members based on market share as of 12/31/15; retain  
31       at least 50% of 2015 new graduate members as of 12/31/18; increase Student members by 5% over  
32       12/31/17 number.

33  
34       AGD Student Chapters – By December 31, 2018, have AGD Student Chapters registered at 85% of  
35       US dental schools. G3, S1, S2, S4, S5

- 36  
37       • *Student Chapters are incubators for future AGD full dues-paying members. Capturing*  
38       *them as students gives us the best chance of holding on to them through their careers.*  
39       *National funding of Student Chapters is a tangible incentive to create and grow Student*  
40       *Chapters, to spread the AGD message to new generations of dentists, and to ensure the*  
41       *viability of the organization’s future.*

1 **Introduction:**

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

6  
7 AGD Student Chapters are incubators. They serve as the critical first point of engagement for  
8 members in their journey from student to new dentist to AGD Fellow, Master, and Life Long  
9 Service Recognition recipient. They present high-touch, ongoing opportunities to share the AGD  
10 message, create organizational buy-in and even develop future leaders. *No other AGD program*  
11 *offers this level of attention to students or provides the same potential for membership*  
12 *recruitment beyond dental school.*

13  
14 Currently, the burden of support for AGD Student Chapters rests solely on constituents and/or  
15 components. They volunteer time and energy to develop successful programs. They are  
16 resourceful in finding speakers who often do not require honoraria. They pay for any marketing  
17 efforts and for meals during meetings. They often cover the cost of student membership dues to  
18 stimulate maximum AGD exposure among an impressionable population.

19  
20 In 2017, three Texas components invested a total of \$16,770.23 in support of AGD Student  
21 Chapters (\$5,970.26 for Dallas, \$9,233.68 for Houston, and \$1,566.29 for San Antonio). In  
22 2018, Texas AGD invested a total of \$6000 in support of AGD Student Chapters. We believe  
23 that AGD should share in this investment in the future of the organization. Whether or not the  
24 local component or constituent pays for the national student member dues, we feel it is  
25 appropriate that the student dues collected by AGD be forwarded to the supporting component or  
26 constituent to help offset the cost of running the respective Student Chapter. It would be a  
27 tangible commitment by AGD to financially support Student Chapters, to share in responsibility  
28 for future member recruitment, and to lay a foundation for the future. It’s the right thing to do.

29  
30 **Necessary Information:**

- 31 •

32  
33 **What We Don’t Know:**

- 34 • We don’t know the total cost to AGD for administrative support of each student  
35 membership.  
36 • We don’t know how to consistently and effectively recruit new members once students  
37 graduate from dental school. If they didn’t receive that message during their school days,  
38 the opportunity is largely lost.  
39 • We don’t know how many members of AGD Student Chapters will maintain AGD  
40 membership as new dentists. On the other hand, there is no guarantee that dental students  
41 who were *not* involved with AGD Student Chapters will go on to become AGD  
42 members, either. It is reasonable to assume that early exposure to the AGD culture is  
43 more likely than not to lead to AGD membership. We must fully take advantage of this  
44 “captive audience” while they are in dental school.

1 **Pros and Cons:**

2  
3 **Pros:**

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

12  
13 **Cons:**

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

16  
17 **Executive Director/CEO Recommendations:**

18 **From:** Max Moses

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

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

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

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

24  
25 The Texas AGD has brought to the House of Delegates a proposal to address a very important  
26 facet of AGD membership: Dental Students. While I applaud the Texas AGD for starting the  
27 conversation, I believe that this AIR is premature.

28  
29 There is a great deal of information that the HOD needs to know before adopting such a “sea  
30 change” approach as suggested by the Texas AGD. For example, how does support for student  
31 member chapters vary among the constituents? What are the metrics of success? How would the  
32 constituents improve student recruitment and retention? How will this transfer of funds improve  
33 the conversion rate of students to active members? What standardization of approach is  
34 required? How will AGD replace the over \$100,000 in student dues and still provide over  
35 \$300,000 in services? Fundamental questions such as what will the \$100,000+ be used for by  
36 the constituents? How will differences among the capabilities of constituents that have student  
37 chapters be equalized?

38  
39 We collectively need to identify gaps, crossovers of benefits, duplication of efforts, etc. to  
40 identify common denominators among the student chapters to try to determine what should be  
41 replicated because it is successful and what should be discouraged because it isn’t effective.

42  
43 As is clear from the chart below, It requires over \$58 to support each student collectively over  
44 \$300,000 – significantly more than the \$20 in dues that they pay. This is in addition to what  
45 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
<b>Total Annual Direct Student Support</b>		<b>\$313,355</b>
# of students		\$5,336
Per Student Direct Cost		\$58.72
Student Dues Revenue		\$106,720
Less: Annual Support Costs		\$313,355
Student Annual Subsidy		<b>(\$206,635)</b>
Indirect Cost:		
Scientific Sessions deferred revenue		\$12,825
Webinar deferred revenue		\$4,425

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

Max G. Moses, JD, CPA, MBA  
 Executive Director  
 Academy of General Dentistry  
 560 W. Lake St., Sixth Floor  
 Chicago, IL 60661-6600  
 312.440.4303 Direct  
 888.AGD.DENT Main  
 888.243.7392 Exclusive AGD Leader Line  
 312.335.3438 Fax  
[Max.Moses@agd.org](mailto:Max.Moses@agd.org)  
[www.agd.org](http://www.agd.org)

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

11 **Suggested Council or Agencies to Complete Action:**

12 *Membership Council*

13 *Finance Committee*

14

15 **Suggested Councils or Agencies to be Involved in Collaboration:**

16 *Include all the councils who will be involved in the project and information on when the staff liaisons/Council Chairs were notified*

17

18

19

20 **Chair Approval Email:**

- 21
  - N/A

22

23 **Division Coordinator Review Email:**

- 24
  - N/A

25

26 **Board Liaison Review Email:**

- 27
  - N/A

28

29 **CFO Review Email:**

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**AIR Addendum – HOD Policy Change Request**

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**Action:**        Add \_\_\_\_\_        Revise \_\_\_\_\_        Delete \_\_\_\_\_

**Existing Policy to Revise/Delete:**

**Resolution Presented for Approval:**

**Related Existing HOD Policies:**

**Are existing AGD policies inadequate or no longer appropriate? Explain.**

**For additions/revisions, how often should this policy be reviewed? [Default is every 5 years]**

**Any documentation or literature considered in developing this submission?**

**Other Comments?**

1 Resolution 104

2  
3 **“Resolved, that effective starting with the 2020 fiscal year, the Academy of General**  
4 **Dentistry waive annual membership dues for two (2) faculty members for each Student**  
5 **Chapter.”**

6  
7 **AGD Membership Dues Waiver for AGD Student Chapter Faculty Advisors/Leaders**  
8

9 **Prepared by:** Texas AGD

10 **Date of Report:** 8/15/2018

11 **Staff Resources:**

12  
13 **Total Financial Cost:** TBD by AGD Staff

14  
15 **Budget Ramifications:** TBD by AGD Staff

16  
17 **Action/Timeline:** Submission to the 2018 House of Delegates to become effective in fiscal year  
18 2020

19  
20  
21  
22  
23 **How It Fits into the Strategic Plan:**

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

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

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

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

36  
37 Goal 3—Membership: Increase the number of full-dues equivalent members to 27,000 and  
38 retain the existing marketshare of United States members by the end of 2018; whereby the  
39 ‘existing marketshare’ was the marketshare as of December 31, 2015.

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

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

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

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

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

10  
11 **Goal 5—Organizational Excellence:** Ensure that the AGD is financially viable, functions  
12 efficiently in a cost-effective manner, and has a mutually supportive relationship with its  
13 constituents.

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

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

#### 20 21 **How it Fits into the Corporate Objectives:**

22 **Membership** – Increase the number of “full dues-equivalent” members to 27,000 by the end of  
23 2018; increase existing market share of US members based on market share as of 12/31/15; retain  
24 at least 50% of 2015 new graduate members as of 12/31/18; increase Student members by 5% over  
25 12/31/17 number.

26  
27 **AGD Student Chapters** – By December 31, 2018, have AGD Student Chapters registered at 85% of  
28 US dental schools. G3, S1, S2, S4, S5

- 29  
30 • *Student Chapters are incubators for future AGD full dues-paying members. Capturing*  
31 *them as students gives us the best chance of holding on to them through their careers.*  
32 *Promoting AGD faculty leadership for Student Chapters is an incentive to create and*  
33 *grow Student Chapters, to spread the AGD message to new generations of dentists, and*  
34 *to ensure the viability of the organization’s future.*

#### 35 36 **Introduction:**

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

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

3  
4 **Necessary Information:**

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

13  
14 **What We Don't Know:**

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

22  
23 **Pros and Cons:**

24  
25 **Pros:**

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

37  
38 **Cons:**

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

42  
43  
44 **Executive Director/CEO Recommendations:**

45 **From:** Max Moses

46 **Sent:** Tuesday, October 16, 2018 4:05 PM

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

1 **Cc:** Daniel Buksa <daniel.buksa@agd.org>; Thomas Killam <Thomas.Killam@AGD.org>;  
2 Christa Ojeda <Christa.Ojeda@AGD.org>  
3 **Subject:** AIR re: Dues Waiver for Faculty at Student Chapter  
4

5 Texas AGD recognizes the importance of students and student chapters to the long term growth  
6 of the AGD. The AIR they have submitted to waive annual membership dues for two faculty  
7 members for each student chapter is an interesting strategy. Several questions need to be  
8 addressed in order to understand how this proposal would be implemented. For example:  
9

- 10 a. How are the two faculty members selected?
- 11 b. If more than two faculty members involved with a Student Chapter, who determines the  
12 odd person out?
- 13 c. Do the faculty members need to be general dentists?
- 14 d. Can the faulty members be “adjunct” or part-time faculty? Should they be full-time  
15 faculty?
- 16 e. Are there specific expectations and standards of activity for a student chapter faculty  
17 member?
- 18 f. How are they evaluated as “earning” their membership fee waiver?
- 19 g. Are constituent and/or component dues waived as well?
- 20 h. Will a 1099-MISC need to be issued to include as potential taxable income the amount  
21 “earned” by the faculty member due to the waiver of the dues?
- 22 i. What does success look like? E.G., will more students choose general dentistry as their  
23 career path? Will more students remain members of AGD at Rate Level 5? Will more  
24 apply for a GPR or AEGD residency program?
- 25 j. Will a separate, lower dues rate for all full-time faculty at dental schools increase overall  
26 membership in the AGD sufficiently to make up for revenue loss from those who  
27 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](mailto:Max.Moses@agd.org)  
40 [www.agd.org](http://www.agd.org)  
41  
42  
43

44 **How It Fits into the Market Research:**  
45

46 **Does this conflict with the Constitution and Bylaws, an AGD HOD Policy or Board Policy?**  
47 **If yes, please provide the conflict and how you propose to resolve it:**  
48

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**Responsible Staff Liaison & AGD member:**

*Include all the staff who will be involved in the project*

**Suggested Council or Agencies to Complete Action:**

*Insert the council name here*

**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 liaisons/Council Chairs were notified*

**Chair Approval Email:**

- N/A

**Division Coordinator Review Email:**

- N/A

**Board Liaison Review Email:**

- N/A

**CFO Review Email:**



**AIR Addendum – HOD Policy Change Request**

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**Action:**        **Add** \_\_\_\_\_        **Revise** \_\_\_\_\_        **Delete** \_\_\_\_\_

**Existing Policy to Revise/Delete:**

**Resolution Presented for Approval:**

**Related Existing HOD Policies:**

**Are existing AGD policies inadequate or no longer appropriate? Explain.**

**For additions/revisions, how often should this policy be reviewed? [Default is every 5 years]**

**Any documentation or literature considered in developing this submission?**

**Other Comments?**

1 Resolution 150

2  
3 “Resolved, that the 2019 Budget with Revenues of \$14,839,221 and Expenses of \$14,839,221  
4 netting out to 0 Net Loss from Operations with a Contingency of \$123,497 and capital  
5 budget of \$481,522 be approved. And be it further,

6  
7 Resolved, that House Policy 2017:150S4-H-11 be rescinded.

8  
9 ~~2017:150S4-H-11 “Resolved, that the 2018 budget with Net Income from Operations of \$0~~  
10 ~~pre-spending and \$0 post-spending and a capital budget of \$89,500 be approved.~~

11  
12 ~~And be it further, resolved, that the budget be amended to include a \$3 increase in student~~  
13 ~~dues and be it further resolved that the contingency fund be reduced by \$34,420.~~

14  
15 AIRBIV2018#02 – Approve 2019 Budget

16  
17 Prepared by: Christa Ojeda, Chief Financial Officer

18  
19 Date of Report: July 13, 2018

20  
21 Staff Resources: NA

22  
23 Total Financial Cost: Develops budget for calendar year 2019

24  
25 Budget Ramifications: Develops budget for calendar year 2019

26  
27 Action/Timeline: Record vote at 2017-2018 Board Meeting IV; implementation starting January  
28 1, 2019.

29  
30 **BOARD RECOMMENDS ADOPTION**

31  
32 *Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson,*  
33 *Harunani, King, Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland,*  
34 *Wooden, Worm*

35  
36 *A - Gehrig, ~~Kozelka~~, Tillman*

37  
38 *N/A - Cordero*

39  
40 **How it Fits into the Strategic Plan:**

- 41
  - N/A

42  
43 **How it Fits into the Corporate Objectives:**

- 44
  - N/A

45  
46 **Introduction:**

47 The attached report from the Budget & Finance Committee provides the following:

- 1 • Impact of the Dues Stabilization Policy and HOD policies on stipends on the 2019  
2 budget.
- 3 • A summary of financial results which includes how the Investment Policy mandates were  
4 achieved.
- 5 • Describes the budget process.
- 6 • The Statement of Activities by Program details the budget by AGD programs for both  
7 revenues and expenses.
- 8 • A summary of the Board contingency fund.
- 9 • Information regarding the capital budget for 2019 and additional capital improvements.

#### 10 11 **Necessary Information:**

- 12 • All members of Budget and Finance Committee have provided input into this report.
- 13 • The Budget and Finance Committee, including Dr. Gajjar and Dr. White, unanimously  
14 approved (by roll call vote) the 2019 Budget and annual report. Dr. Donald Worm was  
15 unable to attend the meeting but reviewed the report afterwards.
- 16 • The budget meets the mandates of the Investment policy.
- 17 • The budget includes CPI dues increase, no student dues increase and a CPI increase to the  
18 officers' annual honorariums and the RDs' and Board's allotments.
- 19 • Board Contingency fund of \$100,000.

#### 20 21 **What We Don't Know:**

- 22 • As with any budget, the budget was based on the information available to staff at the time  
23 the budget was developed. As time progresses, circumstances can change which may  
24 result in actual results varying from budget. It is the responsibility of staff and the Board  
25 to respond to these changes to ensure that the actual Net Income from Operations is at  
26 budget or better.

#### 27 28 **Pros and Cons:**

##### 29 **Pros:**

- 30 • A budget provides a guide of where the organization wants to focus its resources.

##### 31 **Cons:**

- 32 • As the 2019 budget is compiled prior to the start of the budget year, alterations to the  
33 budget may be necessary.

#### 34 35 **Executive Director/CEO Recommendations:**

36 **From:** Max Moses

37 **Sent:** Friday, July 13, 2018 4:01 PM

38 **To:** Christa Ojeda <Christa.Ojeda@AGD.org>; Dr. Uppal <sanjayuppal@yahoo.com>

39 **Subject:** RE: 2019 Budget AIR

40  
41 I agree that this AIR should be presented to the Board for discussion.

42  
43  
44 Max G. Moses, JD, CPA, MBA

45 Executive Director

#### 46 47 **How It Fits into the Market Research:**

- 1       • N/A

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 Liaisons & Council/Committee Chair:**

8 Dr. Sanjay Uppal, DDS, FAGD

9 Chair, Budget and Finance Committee

10 519.212.1677-p

11 [sanjayuppal@yahoo.com](mailto:sanjayuppal@yahoo.com)

12

13 Dr. Mohamednazir F. Harunani, DDS, MAGD

14 Treasurer & Vice Chair, Budget and Finance Committee

15 815.222.7228-p

16 [mharunani@gmail.com](mailto:mharunani@gmail.com)

17

18 Christa Ojeda

19 Chief Financial Officer

20 312.440.4315-p

21 [christa.ojeda@agd.org](mailto:christa.ojeda@agd.org)

22

23 **Suggested Council or Agencies to Complete Action:**

24 Budget & Finance Committee

25

26 **Chair Approval Email:**

27 **From:** Sanjay Uppal [mailto:[sanjayuppal@yahoo.com](mailto:sanjayuppal@yahoo.com)]

28 **Sent:** Friday, July 13, 2018 6:28 PM

29 **To:** Max Moses <[Max.Moses@AGD.org](mailto:Max.Moses@AGD.org)>

30 **Cc:** Christa Ojeda <[Christa.Ojeda@AGD.org](mailto:Christa.Ojeda@AGD.org)>

31 **Subject:** Re: 2019 Budget AIR

32

33 I approve this AIR and it needs to be presented to the board.

34

35 Thanks,

36

37 Sanjay

38

39 **Division Coordinator Review Email:**

- 40       • N/A

41

42 **Board Liaison Review Email:**

- 43       • N/A

44

45 **CFO Review Email:**

- 46       • N/A

47

**AIR Addendum – HOD Policy Change Request**

**Action:**            Add   X          Revise \_\_\_\_\_        Delete   X  

**Existing Policy to Revise/Delete:**

**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 Presented for Approval:**

**“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.”**

**Related Existing HOD Policies:**

N/A

**Are existing AGD policies inadequate or no longer appropriate? Explain.**

N/A

**For additions/revisions, how often should this policy be reviewed? [Default is every 5 years]**

Annually

**Any documentation or literature considered in developing this submission?**

N/A

**Other Comments?**

N/A

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;

17 To oversee the AGD’s print and online content, both to the profession and to the public;

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:

42 Pamela Marzban, DDS, FAGD, LVIF, dentist with emergency preparedness experience who  
43 provides cosmetic services to patients in Burke, Fairfax, Fairfax Station and the surrounding  
44 Northern Virginia communities

45 Lisa Knowles, DDS, international speaker and writer who focuses on leadership and business  
46 communication development

47 Jamie Toop, DDS, dentist in Las Vegas and current faculty member for the PDS Institute

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.

#### 4 5 General Dentistry

#### 6 7 **2017 Submissions**

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

13  
14 The bulk of submissions continue to come from Brazil (50.6%), the United States (28.6%), and  
15 India (11.0%), while various other countries represent a small proportion of manuscripts  
16 submitted (9.8%). Our total acceptance rate from 2014 to present is 41.2%.

#### 17 18 **Columnist Recruitment Efforts**

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

22  
23 Our efforts to recruit a new Ethics columnist are ongoing. We have had several candidates, but  
24 none has passed the peer-review process for columns. In the meantime, our respected former  
25 columnist, Dr. Toni Roucka, has submitted some columns on the subject.

#### 26 27 **2018 Collaboration Update**

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

#### 32 33 **General Dentistry recognized for excellence**

34  
35 *General Dentistry* was recognized by the Association Media & Publishing EXCEL Award for its  
36 **Feature Article** category for "Nerve damage in dentistry," by M. Anthony Pogrel, DDS, MD,  
37 published in the March/April 2017 issue. *General Dentistry* was also awarded an EXCEL in the  
38 **Design Excellence** category, recognizing the journal's "use of images and design that draws the  
39 reader into the text" for the complete run of 2017 issues.

#### 40 41 **Advertising**

42  
43 AGD has created a new Corporate Relations department which will be coordinating sponsorship,  
44 advertising, exhibits, AGD Exclusive Benefits and other non-dues revenue programs. This will  
45 allow a more coordinated approach to managing and enhancing relationships with corporations  
46 who seek to reach AGD members. AGD ended its relationship with Association Management  
47 Center in 2017 and to date, the Communications team has continued to provide outreach and  
48 fulfillment to generate revenue and advertising commitments.

1  
2

Advertising Revenue

	2017		2018 (as of 9/13/18)	
	Goal	Actual	Goal	Actual
General Dentistry	\$88,000	\$21,147	\$50,000	\$43,778
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

3 *This includes commitments through the end of 2018.*

4  
5  
6  
7  
8  
9

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. Advertising commitments for the last four months have increased tremendously. Similarly, we are experiencing strong growth in advertising on our digital channels.

10 Goals for 2019 have been set at \$95,000 for *AGD Impact*, \$45,000 for *General Dentistry* and  
11 \$30,000 for AGD’s online channels.

12  
13

**Other Non-Dues Revenue Reporting**

14 The Communications Department also supports the sale of publications subscriptions and  
15 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

16  
17

**AGD Website**

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23

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:

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

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

**Top pages visited:**

- Manage my CE
- View Award Transcript
- Continuing Education and Events
- Member Center
- CE Submission Guidelines

**Completed Updates/Enhancements**

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

<b>Request for Enhancement</b>	<b>Resulting Change</b>
Create a different experience for the member upon login.	When an AGD member logs in, the website recognizes this and automatically drops them down the home page to the member benefits bubbles.
Make the member benefit bubbles clickable to improve the experience.	The member benefit bubbles are now clickable within the bubble and within the description on the right side 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 ability to provide data back to advertisers.	AGD set up an advertising account with Google 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.

**FAGD/MAGD Public Awareness Campaign**

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

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

### 4 **KnowYourTeeth.com Redesign Proposal**

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.

#### 11 **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.

#### 22 **FAGD/MAGD/LLSR Communities on AGD Connect**

23 The Communications, Marketing and Education teams are working on creating specific  
24 communities online to allow Fellows, Masters and LLSRs to have specific forums through AGD  
25 Connect where they can have discussions about their work, trainings and challenges. This will  
26 rollout in September 2018.

#### 28 **Social Media Update**

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

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

#### 38 **AGD Blog/Daily Grind**

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

45 *The Daily Grind* was transitioned to the agd.org domain during the development of the new  
46 website and we’ve continued to see readership remain the same. After reviewing the format the  
47 current blog and speaking with our team of bloggers, the AGD Communications team reached  
48 out to AmericanEagle.com to discuss redesigning *The Daily Grind* to provide our readers with a

1 more traditional blog experience. AGD has rolled out a new design and our blog readers are  
2 experiencing a newly designed masthead that will differentiate the blog from other website  
3 pages, a more visual, colorful layout and individual author pages that contain a photo, bio and  
4 full listing of that author's articles.

## 5 6 **Podcast Update**

7 The podcast had more than 1,800 plays on SoundCloud since our move to the platform in May  
8 2017, with an audience mostly located in the United States, Canada and United Kingdom.

9  
10 January: "How to Solve the Internet Marketing Puzzle," with Mr. Scott Spencer  
11 February: "Jumpstart a Dental Speaking Career," with Ms. Vanessa Emerson  
12 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 Malemacher  
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.*

## 19 20 **Public Relations**

### 21 22 2018 Public Relations Tactics

23  
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

28 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

33 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.)

37 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.

### 40 41 **Spokespeople**

42 Training for new spokespeople will take place in 2018.

### 43 44 **Conclusion**

45 The council is honored to oversee the management of the AGD's communications programs,  
46 both to the profession and to the public. The efforts of the entire council reflect the common goal  
47 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](mailto:kcdelacy@gmail.com)  
25

26 **Kristin Gover**  
27 **Director of Communications**  
28 **312.440.4116**  
29 [Kristin.gover@agd.org](mailto:Kristin.gover@agd.org)  
30

31 **Respectfully submitted:**

32  
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 <drjccheney@aol.com>;  
38 ratheedds@gmail.com; Thomas Killam <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

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 <drjccheney@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 JC  
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

43  
44

1 **Secretary’s Report to the 2018 House of Delegates**

2 The report includes actions of the Board from the 2017-2018 Board Meeting IV; and the Board  
3 Zoom Calls from October 2, 2018.

4  
5 **17-18 Board Meeting IV Minutes**

6  
7 **Dr. Acheson moved, Dr. Dubowsky seconded:**

8 **“Resolved, that the agenda be approved as amended.”**

9  
10 **PASSED**

11  
12 *Y – Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gorman, Guter, Hanson, Harunani, King, Kozelka, Lew, Low,*  
13 *Olsen, Shelly, Smith, Stillwell, Winland, White, Wooden, Worm*

14  
15 *a – Acheson, Gajjar, Uppal*

16  
17 *A – Gehrig, Tillman*

18  
19 *N/A - Cordero*

20  
21 **Executive Session**

22  
23 **Dr. Dyzenhaus moved, Dr. Worm seconded:**

24 **“Resolved, that the Board go into Executive Session at 8:10 a.m. to discuss the Executive**  
25 **Committee minutes.”**

26  
27 **PASSED**

28  
29 *Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, Harunani, King,*  
30 *Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, Winland, White, Wooden, Worm*

31  
32 *A - Gehrig, Tillman*

33  
34 *N/A - Cordero*

35  
36 **Dr. Worm moved, Dr. Cheney seconded:**

37 **“Resolved, that the Board come out of executive session at 8:18 a.m.”**

38  
39 **PASSED**

40  
41 *Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, Harunani, King,*  
42 *Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, Winland, White, Wooden, Worm*

43  
44 *A - Gehrig, Tillman*

45  
46 *N/A - Cordero*

47  
48 **Consent Agenda**

49

1 **Dr. Hanson moved, Dr. Cheney seconded:**

2 **“Resolved, that the consent agenda be approved as amended.”**

- 3
- 4 • **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**
  - 10 • **Investment Committee Annual Report**
  - 11 • **New Dentist Committee Annual Report**
  - 12 • **PACE Council Annual Report**
  - 13 • **Self-Instruction Annual Report**
  - 14 • **Treasurer’s Report from AGD *Impact***

15

16 **PASSED**

17

18 *Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Gajjar, Gorman, Guter, Hanson, Harunani, King, Kozelka,*

19 *Lew, Low, Olsen, Smith, Stillwell, Uppal, Winland, White, Wooden, Worm*

20

21 *a - Edgar, Shelly*

22

23 *A - Gehrig, Tillman*

24

25 *N/A - Cordero*

26

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

28

29 **Dr. Edgar moved, Dr. Stillwell seconded:**

30 **“Resolved, that AIRBIV2018#01 – Adopt the 2019-2021 AGD Strategic Plan, be postponed**

31 **until after lunch to allow for Dean West and Board members to craft a narrative of the**

32 **plan to be included with the policy.”**

33

34 **PASSED**

35

36 *Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, Harunani, King,*

37 *Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, Winland, White, Wooden, Worm*

38

39 *A - Gehrig, Tillman*

40

41 *N/A - Cordero*

42

43 **Budget and Finance Committee Annual Report**

44

45 **Dr. Acheson moved, Dr. Hanson seconded:**

46 **“Resolved, that the face-to-face \$10,000 Board Training Day and travel costs associated**

47 **with the additional training day be eliminated from the 2019 Budget.”**

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**PASSED**

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

*N – Worm*

*a – Hanson, Harunani, Uppal*

*A - Gehrig, Tillman*

*N/A - Cordero*

**Dr. Kozelka moved, Dr. Dubowsky seconded:**

**“Resolved, that the 2019 Budget include four in-person Board meetings.”**

**PASSED**

*Y – Acheson, Drumm, Dubowsky, Dyzenhaus, Gorman, Guter, King, Kozelka, Low, Smith, Winland, Wooden*

*N - Cheney, Edgar, Gajjar, Harunani, Lew, Olsen, Shelly, Stillwell, Uppal, White, Worm*

*a - Hanson*

*A - Gehrig, Tillman*

*N/A - Cordero*

**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**

*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:**



1 **“Resolved, that AIRBIV2018#02 – Approve 2019 Budget discussion be postponed until**  
2 **Saturday, August 25, 2018 to allow for staff to amend the 2019 Budget to include the Board**  
3 **amendments.”**

4  
5 **PASSED**

6  
7 *Y – Acheson, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, Harunani, King, Kozelka,*  
8 *Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, Winland, White, Wooden, Worm*

9  
10 *a – Cheney*

11  
12 *A - Gehrig, Tillman*

13  
14 *N/A - Cordero*

15  
16 **AIRBIV2018#01 – Adopt the 2019-2021 AGD Strategic Plan**

17  
18 **Dr. Stillwell moved, Dr. Olsen seconded:**

19 **“Resolved, that AIRBIV2018#01 – Adopt the 2019-2021 AGD Strategic Plan be approved**  
20 **as amended.”**

21  
22 **“Resolved, that the 2019-2021 AGD Strategic Plan be adopted, effective January 1, 2019, so**  
23 **that it reads:**

24  
25 **Continuing Education**

26  
27 **Expand the breadth, depth and convenience of high quality continuing education**  
28 **opportunities for AGD members.**

29 **Goals**

30  
31 General dentists provide superior patient clinical outcomes.

32 **High-Level Strategy**

33  
34 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.  
40 ○ Support constituent led CE including the development of efforts to provide high quality  
41 education.  
42  
43 • **Expanded educational recognition opportunities** – Create more opportunities to receive  
44 recognition for continuing education.  
45  
46 • **Micro-education** - AGD will explore developing micro-education to specifically address key  
47 clinical training meeting applicable licensure or AGD credentialing requirements.

1  
2 **Practice Leadership and Support**  
3

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

6 **Goals**  
7

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

9 **High-Level Strategy**  
10

11 To achieve these goals, AGD will do the following:

- 12 • **Improve Dental Practice Leadership** – Educate and train dental practice leaders on  
13 effective practice management and leadership techniques. Activities include, but are not  
14 limited to, the following.
- 15 ○ Create robust practice management education providing practice leaders with critical  
16 business and leadership resources.
  - 17 • **Help Dental Students and Residents** – Lead efforts helping students and residents manage  
18 financial impact of their education through best practices.
  - 19 • **Improve Practice Performance** – Make available national buying program or direct  
20 supplier negotiation providing discounts on practice supplies, equipment and other services.  
21 Activities include, but are not limited to, the following.
  - 22 ○ Investigate developing an expanded portfolio of direct practice services (billing, EHR, legal)  
23 designed to provide AGD members with vetted, trusted and useful practice management and  
24 leadership assistance.
  - 25 ○ Investigate direct negotiations with high quality dental practice suppliers to provide for cost  
26 savings or service improvements to AGD dentists and their practice.
- 27

28 **Public and Policy Advocacy**  
29

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

33 **Goals**  
34

35 Patients will seek out AGD members or member led practices.  
36

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

39 **High-Level Strategy**  
40

41 To achieve these goals, AGD will do the following:

- 42 • **Increase Patients** – Promoting efforts highlighting the clinical differentiation between AGD  
43 members and other oral care options.
- 44 • **Educate Policy Makers** – Educate policy makers on the positive patient clinical outcomes of  
45 dentist led general dentistry practices.
- 46 • **Advocate for the Dental Home Concept** - AGD will identify and implement strategies to  
47 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**  
11 **support general dentists, regardless of their personal goals, career paths or practice**  
12 **settings, to be successful within this environment. As a result, the AGD Strategic Plan is**  
13 **designed to outline high level goals and strategies to focus AGD efforts to support general**  
14 **dentistry.**  
15

16 **The AGD Strategic Plan is inclusive of all individuals considering, practicing or supporting**  
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**  
22 **commitment to oral health and better lives because of the Academy of General Dentistry**  
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,**  
31 **and practice support services.**
- 32 • **Patients will seek out general dentists or general dentist led practices and policy makers**  
33 **will support policies encouraging viable general dentist practices because of AGD**  
34 **advocacy, patient education and promotional efforts.**  
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.~~**  
42

43 **~~Strategy 1: Create a Scientific Session that will annually attract at least 25% of AGD members~~**  
44 **~~by the end of 2018.~~**  
45

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

4  
5 ~~Strategy 3: Partner with AGD constituents in the development and delivery of continuing~~  
6 ~~education programs.~~

7  
8 ~~Strategy 4: Protect PACE and increase the number of PACE providers.~~

9  
10 ~~Goal 2 – Advocacy: Strengthen and protect the general dentistry profession and the oral~~  
11 ~~health of the public.~~

12  
13 ~~Strategy 1: Represent the unique interests of general dentists in all advocacy arenas.~~

14  
15 ~~Strategy 2: Advocate on behalf of the general dentistry profession as relates to policy making,~~  
16 ~~insurance, licensing, education, and all levels of government.~~

17  
18 ~~Strategy 3: Advocate on behalf of the public to ensure safe, best quality dentistry practices and~~  
19 ~~appropriate access to care.~~

20  
21 ~~Strategy 4: Develop strong working relationships where appropriate with the AGD~~  
22 ~~constituents, the ADA, and dental specialty organizations in addressing issues of common~~  
23 ~~interest.~~

24  
25 ~~Strategy 5: Pursue instruments and resources to empower the AGD's advocacy agenda.~~

26  
27 ~~Goal 3 – Membership: Achieve a 25% increase in full-dues equivalent members and~~  
28 ~~student members by the end of 2018.~~

29  
30 ~~Strategy 1: Utilize market and member research to determine which current and new member~~  
31 ~~benefits will best serve AGD in attracting and retaining members.~~

32  
33 ~~Strategy 2: Provide and promote products and services that meet the current and future needs~~  
34 ~~of members and prospective members in all stages of practice and career paths.~~

35  
36 ~~Strategy 3: Achieve at least a 10% increase in members' assessments of AGD value by the end~~  
37 ~~of 2018.~~

38  
39 ~~Strategy 4: Actively recruit dental student members and retain them when they become~~  
40 ~~practicing dentists.~~

41  
42 ~~Strategy 5: Attract non-member general dentists by promoting the value of a lifelong learning~~  
43 ~~mindset.~~

44  
45 ~~Goal 4 – Communications: Promote the AGD as an organization dedicated to advancing~~  
46 ~~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.~~

6  
7 ~~Strategy 3: Increase public awareness of the value AGD general dentists bring as gatekeepers~~  
8 ~~to oral health.~~

9  
10 ~~Strategy 4: Focus communication efforts on engaging members to advocate on behalf of~~  
11 ~~general dentistry.~~

12  
13 ~~Strategy 5: Enhance AGD publications and digital-based communication vehicles to~~  
14 ~~effectively communicate to all AGD stakeholders.~~

15  
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  
20 ~~Strategy 1: Ensure the fiscal soundness of AGD.~~

21  
22 ~~Strategy 2: Improve the effectiveness and efficiency of AGD headquarters operations.~~

23  
24 ~~Strategy 3: Streamline the AGD governance structure and operations.~~

25  
26 ~~Strategy 4: Promote an organizational culture that best supports attainment of strategic goals~~  
27 ~~and a healthy operating environment~~

28  
29 ~~Strategy 5: Ensure the success of constituents in meeting the needs of grassroots members.”~~  
30

31 **PASSED**

32  
33 *Y – Acheson, Cheney, Drumm, Dubowsky, Edgar, Gajjar, Gorman, Guter, King, Kozelka, Low, Olsen, Shelly,*  
34 *Stillwell, Uppal, White, Worm*

35  
36 *a – Dyzenhaus, Hanson, Lew, Smith, Winland, Wooden*

37  
38 *A - Gehrig, Harunani, Tillman*

39  
40 *N/A - Cordero*

41  
42 **Annual Reports**

43  
44 **Dr. Dubowsky moved, Dr. Smith seconded:**

45 **“Resolved, that the Dental Practice Council and the Legislative and Government Affairs**  
46 **Council investigate new policy to address government-based healthcare reform.”**  
47

1 **PASSED**

2  
3 *Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, King, Low, Olsen,*  
4 *Shelly, Smith, Stillwell, Uppal, White, Winland, Wooden, Worm*

5  
6 *a –Lew, Kozelka*

7  
8 *A - Gehrig, Harunani, Tillman*

9  
10 *N/A - Cordero*

11  
12 **Dr. Worm moved, Dr. Cheney seconded:**

13 **“Resolved, that the Dental Practice Council Report and the amended Legislative and**  
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 *A - Gehrig, Harunani, Tillman*

24  
25 *N/A - Cordero*

26  
27 **Dr. Hanson moved, Dr. Olsen seconded:**

28 **“Resolved, that the amended Advocacy Fund Annual Report be transmitted to the House**  
29 **of Delegates.”**

30  
31 **PASSED**

32  
33 *Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, , Gajjar, Gorman, Guter, Hanson, King, Kozelka, Lew, Low,*  
34 *Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland, Wooden, Worm*

35  
36 *a – Edgar*

37  
38 *A - Gehrig, Harunani, Tillman*

39  
40 *N/A - Cordero*

41  
42 **Dr. Hanson moved, Dr. Wooden seconded:**

43 **“Resolved, that the Academy of General Dentistry Foundation Annual Report be**  
44 **transmitted to the House of Delegates.”**

45  
46 **PASSED**

47  
48 *Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, , Gajjar, Gorman, Guter, Hanson, King, Kozelka, Lew, Low,*  
49 *Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland, Wooden, Worm*

1 a - Edgar  
2  
3 A - Gehrig, Harunani, Tillman  
4  
5 N/A - Cordero

6  
7 **Dr. Worm moved, Dr. White seconded:**

8 **“Resolved, that the Communications Council Annual Report be referred to the**  
9 **Communications Council for inclusion of budgetary information.”**

10  
11 **PASSED**

12  
13 Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, King, Kozelka, Lew,  
14 Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Wooden, Worm  
15  
16 a - Winland  
17  
18 A - Gehrig, Harunani, Tillman  
19  
20 N/A - Cordero

21  
22 **Dr. Olsen moved, Dr. Stillwell seconded:**

23 **“Resolved, that the Dental Education Annual Report be transmitted to the House of**  
24 **Delegates.”**

25  
26 **PASSED**

27  
28 Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, , Gajjar, Gorman, Guter, Hanson, King, Kozelka, Lew, Low,  
29 Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland, Wooden, Worm  
30  
31 a - Edgar  
32  
33 A - Gehrig, Harunani, Tillman  
34  
35 N/A - Cordero

36  
37 **Dr. Shelly moved, Dr. Stillwell seconded:**

38 **“Resolved, that the Group Benefits Annual Report be transmitted to the House of**  
39 **Delegates.”**

40  
41 **PASSED**

42  
43 Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Gajjar, Gorman, Guter, Hanson, King, Kozelka, Lew, Low,  
44 Olsen, Shelly, Smith, Stillwell, White, Winland, Wooden, Worm  
45  
46 A – Edgar, Gehrig, Harunani, Tillman, Uppal  
47  
48 N/A - Cordero

49  
50 **Dr. Smith moved, Dr. Worm seconded:**

1 “Resolved, that the Membership Council Annual Report be transmitted to the House of  
2 Delegates as editorially amended.”

3  
4 **PASSED**

5  
6 *Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Gajjar, Gorman, Guter, Hanson, King, Kozelka, Lew, Low,*  
7 *Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland, Wooden, Worm*

8  
9 *a - Edgar*

10  
11 *A - Gehrig, Harunani, Tillman*

12  
13 *N/A - Cordero*

14  
15 **AIRBIV2018#04 - Lifelong Learning and Service Recognition Guideline Changes**  
16 **Recognition to Award**

17  
18 **Dr. Kozelka moved, Dr. Cheney seconded:**

19 “Resolved, that AIRBIV2018#04 – Lifelong Learning and Service Recognition Guideline  
20 Changes Recognition to Award be approved.”

21  
22 “Resolved, that the Lifelong Learning & Service Guidelines be amended to read:

23  
24 **Lifelong Learning & Service Recognition Recipient Award Guidelines**

25  
26 ***Why Achieve Recognition?***

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

39  
40 ***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**  
46 **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.**

***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) Completion of 500 credit hours of FAGD/MAGD-approved continuing education credit with at least 300 hours in course attendance. LLSR credit begins to accrue Jan. 1 of the year a member is approved to receive AGD Mastership 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. LLSR community/volunteer service points begin to accrue Jan. 1 of the year a member is approved to receive AGD Mastership. 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) Attendance at a Convocation ceremony held during the AGD scientific sessions to receive the award. Successful candidates are allowed three years following approval to attend the convocation and receive their award.

~~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. Recognition of LLSR recipients will be at the constituent and/or regional level and through AGD publications. Recipients will be invited 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 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 January 1 of the year member was approved for 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 maximum by discipline. Note: No credits will be accepted for advanced academic education programs, such as residencies or advanced degree programs.

Subject Category	Subject Code
Basic Science	010

1	Endodontics	070
2	Electives	130
3	Myofacial Pain/ Occlusion Orofacial Pain*	200
4	Operative Dentistry	250
5	Oral/Max Surgery	310
6	Anes/Pain Mgmt/Pharm*	340
7	Orthodontics	370
8	Pediatrics	430
9	Periodontics	490
10	Practice Mgmt	550
11	Fixed Prosth	610
12	Removable Prosth	670
13	Implants	690
14	Oral Med/Oral Dx	730
15	Special Pt Care	750
16	Esthetics	780

17  
18  
19 *\*These changes go into effect January 1, 2019. Any member that has not achieved or applied*  
20 *for Fellowship, Mastership, or LLSR by December 31, 2016, will be expected to meet the*  
21 *updated continuing education requirements at that time.*

22  
23 **Teaching and Publication Credit**

24 **1) Full or part-time faculty positions in ADACODA/CDAC-accredited institutions are**  
25 **eligible for up to ten (10) credit hours each year. Verification of teaching appointments is**  
26 **required from each institution and should be included with the application.**

27 **2) Teaching continuing dental education courses for organizations that are approved by**  
28 **AGD-PACE, or ADA-CERP or an AGD constituent are eligible for credit. Verification is**  
29 **required that indicates the dental discipline and the number of hours. Credit will be given**  
30 **hour-for-hour for each presentation.**

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

34  
35 **Dental-Related Community and Volunteer Service**

36 **1) One community service point is equal to one hour of dental-related volunteer community**  
37 **service. The Dental Education Council will determine which additional categories of service**  
38 **not described in these guidelines may be eligible. Volunteer work for a for-profit**  
39 **organization, such as a dental manufacturer, is not eligible.**

40 **2) To document dental-related community service, a representative of the organization for**  
41 **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**  
46 **service/volunteer work. Reimbursement of expenses such as airfare, transportation, meals,**  
47 **etc., is allowed.**

- 1  
2 Categories of dental-related community and volunteer service may include, but are not  
3 limited to:  
4 a. Providing pro bono dental services through a not-for-profit organization;  
5 b. Mentoring a dental student, emerging dentist or struggling colleague, through a  
6 recognized dental organization;  
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  
11 community groups or other health professionals;  
12 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;  
15 i. Volunteer work at a local or national dental meeting, such as working at the  
16 organization's booth;  
17 j. Serving as an unpaid team dentist for a school, college, professional sports team or youth  
18 athletic association;  
19 k. Instituting a mouth guard program for a school, college, professional sports team or  
20 youth 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.

23  
24 *Service to Organized Dentistry:*

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

28 1) A maximum of 12 points may be earned annually for serving in a national position in a  
29 dental organization. Service time of less than one year will be prorated by month. Holding  
30 multiple positions at the national level in the same organization is acceptable only up to the  
31 12-point limit each year.

32 2) A maximum of 12 points may be earned annually for serving in state/provincial,  
33 constituent or component positions in a dental organization. Service time of less than one  
34 year will be prorated by month. Holding multiple positions in the same local organization is  
35 acceptable only up to the 12-point limit each year.

36 3) To document service to organized dentistry, a representative of the organization for  
37 which the service was done must complete and sign the provided Volunteer Service  
38 Verification Form, which specifies the type(s) and term(s) of volunteer service(s) provided.  
39 If additional verification is needed, please attach necessary documentation to this form.

40  
41 *Application Procedures and Deadline*

42 **1) All LLSR requirements must be completed by the December 31 application deadline to**  
43 **be considered for the class immediately following the year the application is submitted.**

44 **2) Applications must be postmarked no later than December 31 to be considered for the**  
45 **class immediately following the year the application deadline is submitted, 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  
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  
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.**

17  
18  
19 **Direct inquiries regarding the LLSR to:**

20  
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**

30  
31 **And be it further,**

32  
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.**

36  
37 **Advertising FAGD/MAGD/LLSR Credentials**

38  
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:**

45  
46 **\_\_\_\_\_ , DDS, BDS, or DMD, FAGD, ~~or~~ MAGD, or LLSR**

1 **Fellow, or Master or Lifelong Learning & Service Recipient** of the Academy of General  
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**  
11 **lead the reasonable person to believe that the designation represents an academic degree.”**  
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

21 **And be it further,**

22 **Resolved that House Policy 99:44-H-7, Approve procedures for processing FAGD and**  
23 **MAGD applications be modified to read:**

24  
25 **Approval procedures for processing FAGD, ~~and~~ MAGD, and LLSR applications**  
26

27 **Resolved, that the AGD Board approve procedures and procedural changes related to the**  
28 **mechanics of processing the applications for the Fellowship, ~~and~~ Mastership, and Lifelong**  
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 MAGD~~, 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  
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  
22 And be it further,

23  
24 Resolved, that House Policy 2003:3-H-7 Lifelong Learning and Service ~~Recognition~~  
25 Recipient Program be modified to read:

26  
27 Lifelong Learning and Service ~~Recognition~~ Recipient Award Program  
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 Resolved, that the document Lifelong Learning and Service ~~Recognition~~ Recipient Award  
33 (LLSR) Guidelines be adopted.”

34  
35 **DEFEATED**

36  
37 *Y – Edgar, Gajjar, Kozelka, Lew, Olsen, Shelly, Stillwell, Uppal*

38  
39 *N – Acheson, Drumm, Dubowsky, Dyzenhaus, Gorman, Guter, Hanson, King, Low, Smith, Winland, Wooden, Worm*

40  
41 *a - Cheney*

42  
43 *A - Gehrig, Harunani, Tillman, White*

44  
45 *N/A - Cordero*

46  
47 **AIRBIV2018#05 – Lifelong Learning and Service Recognition Guideline Changes**  
48 **Limitation to One Recognition**

1  
2 **Dr. Cheney moved, Dr. Guter seconded:**

3 **“Resolved, that AIRBIV2018#05 – Lifelong Learning and Service Recognition Guideline**  
4 **Changes Limitation to One Recognition be approved.”**

5  
6 **“Resolved, that the Lifelong Learning & Service Guidelines be amended to read:**

7  
8 **Lifelong Learning & Service Recognition Guidelines**

9  
10 ***Why Achieve Recognition?***

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

23  
24 ***A Charge to all Masters***

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

- 29 **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.**

33  
34  
35 ***LLSR Requirements***

- 36 **1) All applicants must be AGD Masters, with AGD membership in good standing at the**  
37 **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.**  
41 **3) Completion of 100 hours of AGD-approved dental-related community/volunteer service**  
42 **and/or service to organized dentistry is required. Hours must have been performed since**  
43 **the date Mastership was received ~~or since a previous LLSR was received.~~ The acceptability**  
44 **of points is subject to review by the Dental Education Council. Examples of acceptable**  
45 **dental-related volunteer service can be found below in the Community and Volunteer**  
46 **Service section.**

1 **4) An application must be submitted with the designated application processing fee, which**  
2 **is determined annually by the Dental Education Council. This fee covers direct costs, plus**  
3 **\$100 for overhead costs. Applications must be postmarked by December 31.**  
4

5 **5) Acceptance or denial will be communicated to applicants following review of the**  
6 **application by the Dental Education Council. All decisions of the council are final. In**  
7 **addition to recognition on a national level, additional recognition of LLSR recipients can**  
8 **also will be at the constituent and/or regional level and through AGD publications.**  
9 **Recipients will be ~~invited~~ requested to be present and attend the Convocation Ceremony**  
10 **where they will be celebrated by inclusion of their names in the Convocation program.**  
11 **Recipients will be seated in a designated area and will walk across the stage to be honored,**  
12 **and have each of their names read, ~~prior to~~ following the FAGD and MAGD awardees.”**  
13

#### 14 **Course Attendance**

15 **1) Completion of 500 hours of FAGD/MAGD-approved continuing education credit. Hours**  
16 **must have been earned since the date Mastership was received ~~or since a previous LLSR~~**  
17 **~~was received~~:**

- 18 **a) At least 150 continuing education hours must be earned in participation course**  
19 **attendance;**  
20 **b) A maximum of 100 credits for teaching is allowed;**  
21 **c) A maximum of 100 credits for publications is allowed.**  
22

23 **2) Credits for course attendance, teaching or publications must be in at least eight (8) of the**  
24 **following disciplines, although there are no minimums or maximums by discipline for non-**  
25 **participation credits. Note: No credits will be accepted for advanced academic education**  
26 **programs, such as residencies or advanced degree programs.**  
27

28 <b>Subject Category</b>	<b>Subject Code</b>
29 <b>Basic Science</b>	<b>010</b>
30 <b>Endodontics</b>	<b>070</b>
31 <b>Electives</b>	<b>130</b>
32 <b>Myofacial Pain/</b>	
33 <b>Occlusion Orofacial Pain*</b>	<b>200</b>
34 <b>Operateive Dentistry</b>	<b>250</b>
35 <b>Oral/Max Surgery</b>	<b>310</b>
36 <b>Anes/Pain Mgmt/Pharm*</b>	<b>340</b>
37 <b>Orthodontics</b>	<b>370</b>
38 <b>Pediatrics</b>	<b>430</b>
39 <b>Periodontics</b>	<b>490</b>
40 <b>Practice Mgmt</b>	<b>550</b>
41 <b>Fixed Prosth</b>	<b>610</b>
42 <b>Removable Prosth</b>	<b>670</b>
43 <b>Implants</b>	<b>690</b>
44 <b>Oral Med/Oral Dx</b>	<b>730</b>
45 <b>Special Pt Care</b>	<b>750</b>
46 <b>Esthetics</b>	<b>780</b>

47



1 ~~*\*These changes go into effect January 1, 2017. Any member that has not achieved or applied*~~  
2 ~~*for Fellowship, Mastership, or LLSR by December 31, 2016, will be expected to meet the*~~  
3 ~~*updated continuing education requirements at that time.*~~  
4

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

6 **1) Full or part-time faculty positions in ADA/CDA-accredited institutions are eligible for**  
7 **up to ten (10) credit hours each year. Verification of teaching appointments is required**  
8 **from each institution and should be included with the application.**

9 **2) Teaching continuing dental education courses for organizations that are approved by**  
10 **PACE, or an AGD constituent are eligible for credit. Verification is required that indicates**  
11 **the dental discipline and the number of hours. Credit will be given hour-for-hour for each**  
12 **presentation.**

13 **3) The publication of a scientific article, case report, technique paper or clinical research**  
14 **report in a scientific journal or textbook is worth ten (10) credit hours. A copy of the**  
15 **articles, with dates of publication, should be submitted with the application.**  
16

#### 17 **Community and Volunteer Service**

18 **1) One community service point is equal to one hour of volunteer community service. The**  
19 **Dental Education Council will determine which additional categories of service not**  
20 **described in these guidelines may be eligible. Volunteer work for a for-profit organization,**  
21 **such as a dental manufacturer, is not eligible.**

22 **2) To document community service, a representative of the organization for which the**  
23 **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)**  
25 **provided. If additional verification is needed, please attach necessary documentation to this**  
26 **form.**

27 **3) No financial remuneration or “in-kind” remuneration may be received for**  
28 **service/volunteer work. Reimbursement of expenses such as airfare, transportation, meals,**  
29 **etc., is allowed.**  
30

31 **Categories of community and volunteer service may include, but are not limited to:**

32 **a. Providing pro bono dental services through a not-for-profit organization;**

33 **b. Mentoring a student, emerging dentist or struggling colleague, through a recognized**  
34 **dental organization;**

35 **c. Service in a volunteer dental clinic;**

36 **d. Service overseas on a dental mission;**

37 **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;**

43 **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;**

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

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

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

5  
6 *Service to Organized Dentistry:*

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

10 **1) A maximum of 12 points may be earned annually for serving in a national position in a**  
11 **dental organization. Service time of less than one year will be prorated by month. Holding**  
12 **multiple positions at the national level in the same organization is acceptable only up to the**  
13 **12-point limit each year.**

14 **2) A maximum of 12 points may be earned annually for serving in state/provincial,**  
15 **constituent or component positions in a dental organization. Service time of less than one**  
16 **year will be prorated by month. Holding multiple positions in the same local organization is**  
17 **acceptable only up to the 12-point limit each year.**

18 **3) To document service to organized dentistry, a representative of the organization for**  
19 **which the service was done must complete and sign the provided Volunteer Service**  
20 **Verification Form, which specifies the type(s) and term(s) of volunteer service(s) provided.**  
21 **If additional verification is needed, please attach necessary documentation to this form.**

22  
23 *Application Procedures and Deadline*

24 **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**  
26 **class immediately following the application deadline is submitted, and must include the**  
27 **designated application fee. This fee is determined annually by the Dental Education**  
28 **Council and includes a non-refundable processing fee. The AGD is not responsible for lost**  
29 **or delayed mail.**

30 **3) Only the Dental Education Council may determine the acceptability of LLSR**  
31 **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**  
33 **AGD Annual Meeting & Exhibits through the inclusion of names of the new recipients in**  
34 **the Convocation program and in AGD publications.**

35 **Direct inquiries regarding the LLSR to:**

36  
37 **Academy of General Dentistry**  
38 **Department of Dental Education**  
39 **560 W. Lake Street, Sixth Floor**  
40 **Chicago, Illinois 60661-6600**  
41 **Phone 888.AGD.DENT (243.3368)**  
42 **Fax 312.335.3428**

43  
44 **Adopted HOD 7/2003**  
45 **Amended HOD 6/2015**

46  
47 **And be it further,**

1  
2 **Resolved, that House Policy 2003:3-H-7 Lifelong Learning and Service Recognition**  
3 **Program be modified to read:**

4  
5 **Lifelong Learning and Service Recognition Program**

6 **“Resolved, that the AGD offer the Lifelong Learning and Service Recognition (LLSR)**  
7 **program to recognize the accomplishment of AGD Masters for their continuing education**  
8 **and volunteer service to dentistry, and be it further**

9  
10 **Resolved, that the document Lifelong Learning and Service Recognition (LLSR)**  
11 **Guidelines be adopted.”**

12  
13 **PASSED**

14  
15 *Y – Cheney, Dubowsky, Gorman, Guter, Kozelka, Low, Olsen, Smith, Stillwell, Uppal, Winland*

16  
17 *N – Acheson, Drumm, Dyzenhaus, Hanson, King, Lew, Shelly, Wooden, Worm*

18  
19 *a - Edgar, Gajjar*

20  
21 *A - Gehrig, Harunani, Tillman, White*

22  
23 *N/A - Cordero*

24  
25 **AIRBIV2018#06 – Elimination of CE Submissions Requiring Manual Data Entry**

26  
27 **Dr. Stillwell moved, Dr. Cheney seconded:**

28 **“Resolved, that AIRBIV2018#06 – Elimination of CE Submissions Requiring Manual Data**  
29 **Entry be approved.”**

30  
31 **“Resolved, that Policy Type: V. Board Policy Statements, I. Membership Maintenance be**  
32 **amended to read:**

33  
34 **I. Membership Maintenance**

35  
36 **Continuing dental education is a fundamental value of the AGD, and membership in the**  
37 **AGD requires a minimum of 75 hours of CE every three (3) years. Therefore, all members**  
38 **are required to verify this requirement by signing a statement with their annual dues**  
39 **renewal that this requirement is being satisfied. Members requiring documentation for the**  
40 **AGD awards or other needs, such as licensure, will submit course documentation as has**  
41 **been done in the past.**

42  
43 **Submission of CE by Members**

44 **Effective ~~April 17, 2015~~ August 31, 2019 all Continuing Education hours (CE) must be**  
45 **submitted to AGD using the AGD online CE submission form by its members and be**  
46 **accompanied by a course completion certificate or verifiable equivalent issued by the**  
47 **course provider in order for it to be displayed on the members’ AGD Licensing and Award**  
48 **Transcripts.**

1  
2 **And be it further,**

3  
4 **Resolved, that the AGD be a repository for the certificates.**

5  
6 **Approved 17-18 Board Meeting IV~~2015 Board Meeting III~~"**

7  
8 **PASSED**

9  
10 *Y – Acheson, Cheney, Dubowsky, Dyzenhaus, Gajjar, Gorman, Guter, King, Kozelka, Lew, Low, Olsen, Shelly,*  
11 *Smith, Uppal, Winland, Worm*

12  
13 *N – Stillwell*

14  
15 *a - Drumm, Edgar, Hanson, Wooden*

16  
17 *A - Gehrig, Harunani, Tillman, White*

18  
19 *N/A - Cordero*

20  
21 **AIRBIV2018#03 – Rescind HOD Policy 93:28 H 7 Health Care Reform Criteria**

22  
23 **Dr. Shelly moved, Dr. Cheney seconded:**

24 **“Resolved, that AIRBIV2018#03 – Rescind HOD Policy 93:28 H 7 Health Care Reform**  
25 **Criteria be approved.”**

26  
27 **“Resolved, that AGD HOD policy 93:28-H-7 be rescinded:**

28  
29 **~~93:28 H 7 —~~**

30 **~~“Resolved, that it is the policy of the Academy of General Dentistry that if dentistry is to be~~**  
31 **~~included in any government health care program reform, it must:~~**

- 32  
33 **~~1) — Be adequately funded to provide broad access;~~**  
34 **~~2) — Permit freedom of choice of dentists;~~**  
35 **~~3) — Be based on fee for service; and~~**  
36 **~~4) — Assure high quality dental care.~~**

37  
38 **and be it further**

39  
40 **~~Resolved, in any case where dentistry is included in health care reform, the AGD support~~**  
41 **~~the following six recommendations set forth by the American Dental Association:~~**

- 42  
43 **~~1. — Maintain the advantages of the current dental care and dental benefits system,~~**  
44 **~~which would not require inclusion of dental benefits for population groups currently~~**  
45 **~~receiving regular dental care, and which would not require public sector participation and~~**  
46 **~~subsequent cost transfer. The Association strongly opposes any change in the tax~~**  
47 **~~deductibility of current dental benefit coverage.~~**  
48

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

5  
6 ~~3. For population groups currently not receiving regular dental care the Association~~  
7 ~~supports the opportunity for a) small employers purchase dental plans in the private~~  
8 ~~sector, b) development of cooperative dental benefit purchasing alliances administered in~~  
9 ~~the private sector.~~

10  
11 ~~4. The Association recommends that preventive services and educational programs for~~  
12 ~~children be included in any health system reform proposal. Preventive services may~~  
13 ~~include but are not necessarily limited to, fluoridation of community water supplies, oral~~  
14 ~~prophylaxis and application of topical fluorides and sealants; dietary fluoride supplements;~~  
15 ~~restoration of carious teeth; maintenance of space resulting from the early loss of primary~~  
16 ~~teeth and patient education.~~

17  
18 ~~5. The Association recommends that in the event that a more comprehensive program~~  
19 ~~is enacted, preventive, diagnostic, emergency services and basic restorative and periodontal~~  
20 ~~care be included for children and the elderly.~~

21  
22 ~~6. The Association believes that if the Medicare program is expanded to include~~  
23 ~~coverage for additional dental health care services, we would endorse the inclusion of a~~  
24 ~~defined dental benefit plan for the elderly population. These services would be expressly~~  
25 ~~focused on those elderly who are in long term residential care or home bound. Delivery of~~  
26 ~~these services should not be compromised by discrimination by category of provider~~  
27 ~~(physician or dentist)."~~

28  
29 **PASSED**

30  
31 *Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, Harunani, King,*  
32 *Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Wooden, Worm*

33  
34 *a - Winland*

35  
36 *A - Gehrig, Tillman*

37  
38 *N/A - Cordero*

39  
40 **AIRBIV2018#07 – Amend Rules of Procedure Reference Committee Timing**

41  
42 **Dr. White moved, Dr. Cheney seconded:**

43 **“Resolved, that AIRBIV2018#07 – Amend Rules of Procedure Reference Committee**  
44 **Timing be approved.”**

1 “Resolved, that the Rules of Procedure for Conducting The Reference Committee Hearings  
2 and Business of the Academy of General Dentistry’s House of Delegates be amended at  
3 paragraph 5 (e), so that they read:  
4

5 ~~All~~ Each Reference Committees must remain in session for a minimum of 90 minutes or  
6 until there are no all attendees at the microphones have left the room so that delegates have  
7 the opportunity to present their views before all each of the Reference Committees.”  
8

9 **PASSED**

10  
11 *Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Gajjar, Gorman, Guter, Hanson, Harunani, King, Kozelka,*  
12 *Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland, Wooden, Worm*

13  
14 *a - Edgar*

15  
16 *A - Gehrig, Tillman*

17  
18 *N/A - Cordero*  
19

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

21  
22 **Dr. Stillwell moved, Dr. Cheney seconded:**

23 “Resolved, that AIRBIV2018#08 – Request to Increase Terms of Policy Review Committee  
24 Members be referred to the Policy Review Committee with edits to stagger member terms  
25 and bring back to the October 15, 2018, 17-18 Board Zoom for approval.”  
26

27 “Resolved, that Policy Type: II. Governance Process, N. Charges of Council and  
28 Committees, O. Policy Review Committee be amended to read:  
29

30 **Policy Review Committee**

31  
32 **1. The Policy Review Committee shall consist of three (3) persons, including the**  
33 **chairperson who will each serve a two (2) year term, and may be reappointed to followed**  
34 **by up to one additional two (2) year term, by appointment of the incoming President. The**  
35 **Speaker of the House will serve as a consultant to the committee.**  
36

37 **2. It shall be the duty of the committee to continually review AGD House of Delegates**  
38 **(HOD) policies, and develop recommendations on their maintenance, development, and**  
39 **strategic implementation.**  
40

41  
42 **3. It shall be the duty of the committee to establish, maintain, and/or clarify policy lexicon**  
43 **to ensure consistent use of terms in the HOD policy manual.**  
44

45 **4. This committee shall be a committee of the Board and not merely a committee contained**  
46 **within the Dental Practice Council or LGA Council.”**  
47

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

3  
4 **6. Evaluate the pricing of all programs and services annually during the fall (at the Joint**  
5 **Council Meetings I if meeting) to be included as part of the budget process and provide a**  
6 **complete pricing analysis to the Board at the Board Meeting III at least every three years.**  
7

8 **7. AGD staff will send out to each council, committee, or other agency member along with any**  
9 **member collaborating on any AGD business the Code of Conduct form to be completed by**  
10 **said individual at the beginning of each governance year. Each covered individual will submit**  
11 **to their staff liaison an accurately completed form, including particular attention paid to any**  
12 **companies that may have remunerated said covered individual and subsequently reported**  
13 **such remuneration to the federal government's reporting structure under the Sunshine Act.**  
14 **The staff liaison will compile all of their individual's forms, and share them with their**  
15 **chairperson and also the executive office staff, who will in turn, forward them to the Audit**  
16 **Committee for further review.**  
17

18  
19 **And be it further,**

20  
21 **Resolved, that the terms of the current members of the committee be amended as follows:**  
22

23 **Dr. Anita Rathee, Region 13, (11/13/2017-~~11/04/2018~~ 11/10/2019), Chair, 4<sup>th</sup> term**

24 **Dr. Shahram Shekib, Region 02, (11/13/2017-~~11/04/2018~~ 11/10/2019), 1<sup>st</sup> term**

25 **Dr. Gary Myers, Region 19. (04/24/2018-~~11/04/2018~~ 11/10/2019), 1<sup>st</sup> term”**  
26

27 **PASSED**

28  
29 *Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, Harunani, King,*  
30 *Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland, Wooden, Worm*

31  
32 *A - Gehrig, Tillman*

33  
34 *N/A - Cordero*  
35

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

37 **Amendment**

38  
39 **Dr. Hanson moved, Dr. Guter seconded:**

40 **“Resolved, that AIRBIV2018#09 – Scientific Session Registration Cancellation Policy**  
41 **2014:105R-H-6 be approved.”**  
42

43 **“Resolved, that HOD Policy 2014:105R-H-6 be rescinded.**  
44

45 **~~2014:105R-H-6 “Resolved, that the Meeting Services Guidelines Scientific Session Fees~~**  
46 **~~Annual Meetings Council be amended to read~~**  
47

1 ~~Scientific Session Fees Annual Meetings Council~~

2  
3 ~~AGD member dentist registrants who purchase tickets for scientific sessions and then find~~  
4 ~~that they are elevated to delegate or alternate delegate status may obtain a full refund of~~  
5 ~~their scientific session ticket(s)~~

6  
7 ~~REFUNDS FOR TICKETS PURCHASED~~

8  
9 ~~Cancellation requests received less than 30 days prior to the first official day of the annual~~  
10 ~~meeting, with the exception of AGD member dentist registrants who have been elevated to~~  
11 ~~delegate or alternate delegate status, will not be eligible for a credit or refund.~~

12  
13 And be it further,

14  
15 Resolved, that the Board Policy Manual be amended to include Policy Type: VI. Board  
16 Guidelines, E. Scientific Session Refunds

17  
18 AGD member dentist registrants who purchase registration and/or tickets for the Scientific  
19 Session may obtain a refund of that purchase, less a processing fee, up to 30 days before the  
20 first day of the Session. AGD member dentist registrant refund requests will incur a \$50  
21 processing fee. Guest registrant refund requests will incur a \$15 processing fee. Requests  
22 received less than 30 days before the first day of the Session will not be eligible for a credit  
23 or refund.

24  
25 **Monitoring: Review by Board annually in April**

26  
27 **PASSED**

28  
29 *Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Gajjar, Gorman, Guter, Hanson, Harunani, King, Kozelka,*  
30 *Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Wooden, Worm*

31  
32 *a – Edgar, Winland*

33  
34 *A - Gehrig, Tillman*

35  
36 *N/A - Cordero*

37  
38 **AIRBIV2018#10 – Amend the Names of the Exam Committees in the BPM, HOD Policy**  
39 **Manual and Constitution and Bylaws**

40  
41 **Dr. Hanson moved, Dr. Acheson seconded:**

42 **“Resolved, that AIRBIV2018#10 – Amend the Names of the Exam Committees in the BPM,**  
43 **HOD Policy Manual and Constitution and Bylaws be approved.”**

44  
45 **“Resolved, that the Board Policy Manual (BPM) be amended at Policy Type: II.**  
46 **Governance Process, M., Section 2., Examinations Council to read:**



1 **E. Examinations Council**

2  
3 **1. The Examinations Council shall consist of six (6) members, including the chairperson,**  
4 **the chairs of the ~~Fellowship Exam Committees (A, B, and C)~~, Examination Development**  
5 **Committee, Examination Assessment Committee and Examination Materials Committee,**  
6 **chair of the Self-Instruction Committee, and one (1) other members who ~~has~~ have served at**  
7 **least one (1) term on the Examination Council or Self-Instruction Committee. All members**  
8 **of the council must ~~and each of whom~~ have achieved Fellowship or Mastership status**  
9 **within the organization.**

10  
11 **2. It shall be the duty of the council:**

12  
13 **a. To be responsible for overseeing the construction, administration, scoring, and security**  
14 **of the Fellowship Examination;**

15  
16 **b. To help develop and administer, in conjunction with the ~~Examination Committees~~**  
17 **Examination Development Committee, Examination Assessment Committee and**  
18 **Examination Materials Committee, any other examination, quizzes, or instruments of**  
19 **measurement when so directed by the HOD, or Board;**

20  
21 **c. To audit the Fellowship Review Course annually to ensure the quality of the course**  
22 **materials is consistent with the overall premise of the Fellowship Examination;**

23  
24 **d. To recommend and enforce policies pertaining to examinations for which it is**  
25 **responsible.**

26  
27 **e. To evaluate the quality and effectiveness of *General Dentistry's* Self-Instruction**  
28 **program once a year.**

29  
30 **3. To adhere to the Sunset Review Process and Schedule outlined in Policy Type V.: Board**  
31 **Policy Statements.**

32  
33 **4. A quorum of the council and the examination committees ~~exam teams~~ shall be a**  
34 **majority of members present.**

35  
36 **5. Each Council and Committee shall evaluate the revenues and expenses pricing of all its**  
37 **programs and services annually as part of the budget process. Additionally, each Council and**  
38 **Committee shall provide a complete revenue and expense analysis to the Board at Board**  
39 **Meeting IV at least every three years, beginning 2019.**

40  
41 **6. AGD staff will send out to each council, committee, or other agency member along with**  
42 **any member collaborating on any AGD business the Code of Conduct form to be**  
43 **completed by said individual at the beginning of each governance year. Each covered**  
44 **individual will submit to their staff liaison an accurately completed form, including**  
45 **particular attention paid to any companies that may have remunerated said covered**  
46 **individual and subsequently reported such remuneration to the federal government's**  
47 **reporting structure under the Sunshine Act. The staff liaison will compile all of their**

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

3  
4 **And be it further:**

5  
6 **Resolved, that the Board Policy Manual (BPM) be amended at Policy Type: II.**  
7 **Governance Process, M., Section 3H, Examinations Items Bank Committee (Team C) to**  
8 **read:**

9  
10 **H. ~~Examinations Items Bank~~ Materials Committee (~~Team C~~)**

11  
12 **1. The Examination ~~Item Bank~~ Materials Committee (~~Team C~~) shall be composed of six (6)**  
13 **members, each of whom have achieved Fellowship or Mastership status within the**  
14 **organization and each of whom have served a minimum of two (2) years on either ~~Team A~~**  
15 **or ~~Team B~~ the Examination Development Committee or ~~of the Fellowship Examination~~**  
16 **Assessment Committee;**

17  
18 **Committee members shall serve no more than two (2) consecutive three (3) year terms on**  
19 **the committee;**

20  
21 **2. It shall be the duty of the committees:**

22  
23 **a. To ensure that each item in the item bank is appropriately and consistently categorized**  
24 **in accordance with the examination content outline;**

25  
26 **b. To review periodically the content outline for the Fellowship Examination and**  
27 **recommend changes in the outline to the council;**

28  
29 **c. To develop the Fellowship Examination Study Guide annually per the established**  
30 **development guidelines set forth by the council;**

31  
32 **3. To adhere to the Sunset Review Process and Schedule outlined in Policy Type V.: Board**  
33 **Policy Statements.**

34  
35 **4. Each Council and Committee shall evaluate the revenues and expenses pricing of all its**  
36 **programs and services annually as part of the budget process. Additionally, each Council and**  
37 **Committee shall provide a complete revenue and expense analysis to the Board at Board**  
38 **Meeting IV at least every three years, beginning 2019.**

39  
40 **5. AGD staff will send out to each council, committee, or other agency member along with**  
41 **any member collaborating on any AGD business the Code of Conduct form to be**  
42 **completed by said individual at the beginning of each governance year. Each covered**  
43 **individual will submit to their staff liaison an accurately completed form, including**  
44 **particular attention paid to any companies that may have remunerated said covered**  
45 **individual and subsequently reported such remuneration to the federal government's**  
46 **reporting structure under the Sunshine Act. The staff liaison will compile all of their**

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

3  
4 **And be it further:**

5  
6 **Resolved, that the Board Policy Manual (BPM) be amended at Policy Type: II.**  
7 **Governance Process, M., Section 3 I. Fellowship Exam Committee (Teams A and B) to**  
8 **read:**

9  
10 **I. Fellowship Exam Committee (Teams A and B) Examination Development Committee**

11  
12 **1. The Fellowship Exam Committee (Teams A and B) Examination Development**  
13 **Committee shall be composed of ~~twelve (12)~~ six (6) members, at least one (1) of whom shall**  
14 **be a member of the Examinations Council, with each of the ~~twelve (12)~~ six (6) members**  
15 **having achieved Fellowship or Mastership status within the organization;**

16  
17 **Those committee members who are not members of the Examinations Council shall serve**  
18 **no more than two (2) consecutive three- (3) year terms on the committee;**

19  
20 **2. It shall be the duty of the committee:**

21  
22 **a. To construct, ~~review,~~ and score the Fellowship Examination;**

23  
24 **b. To make recommendations for an official passing score, based on the statistical**  
25 **analyses, for the annual Fellowship Examination to the Examinations Council;**

26  
27 **c. To maintain an adequate pool of examination items that can be utilized for the**  
28 **Fellowship Examination.**

29  
30 **3. To adhere to the Sunset Review Process and Schedule outlined in Policy Type V.: Board**  
31 **Policy Statements.**

32  
33 **4. Each Council and Committee shall evaluate the revenues and expenses pricing of all its**  
34 **programs and services annually as part of the budget process. Additionally, each Council and**  
35 **Committee shall provide a complete revenue and expense analysis to the Board at Board**  
36 **Meeting IV at least every three years, beginning 2019.**

37  
38 **5. AGD staff will send out to each council, committee, or other agency member along with**  
39 **any member collaborating on any AGD business the Code of Conduct form to be**  
40 **completed by said individual at the beginning of each governance year. Each covered**  
41 **individual will submit to their staff liaison an accurately completed form, including**  
42 **particular attention paid to any companies that may have remunerated said covered**  
43 **individual and subsequently reported such remuneration to the federal government's**  
44 **reporting structure under the Sunshine Act. The staff liaison will compile all of their**  
45 **individual's forms, and share them with their chairperson and also the executive office**  
46 **staff, who will in turn, forward them to the Audit Committee for further review.**  
47

**I.J. 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:**

**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,**

1 **Resolved, that the Board Policy Manual (BPM) be amended at Policy Type: II. Governance**  
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**
- 11 • **~~Examinations Items Bank Committee (Team C)~~ Examination Materials Committee**
- 12 • **Local Advisory Committee**
- 13 • **PACE Council**
- 14 • **Scientific Meeting Council**
- 15 • **Self Instruction Committee**

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  
35 **Resolved, that HOD Policy 2017-101-H-11 be amended to read:**

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**  
44 **recommendations. The letter will be accompanied by a suggested geographical distribution**  
45 **based on the number of members in each region to help make the appointments as**  
46 **geographically balanced as possible. This geographical distribution list will be based on**  
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  
7 **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  
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  
31 **~~a. Examinations Item Bank 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  
42 *A - Gehrig, Tillman*

43  
44 *N/A - Cordero*

45  
46 **AGD and AGDF Contract Negotiation Report**

47  
48 **Dr. Cheney moved, Dr. Olsen seconded:**

1 **“Resolved, that the Board go into executive session at 9:39 a.m. to discuss the AGD and**  
2 **AGDF Contract Negotiation Report.”**

3  
4 **PASSED**

5  
6 *Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, Harunani, King,*  
7 *Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland, Wooden, Worm*

8  
9 *A - Gehrig, Tillman*

10  
11 *N/A - Cordero*

12  
13 **Dr. Hanson moved, Dr. Stillwell seconded:**

14 **“Resolved, that the Board come out of executive session at 9:47 a.m.”**

15  
16 **PASSED**

17  
18 *Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, Harunani, King,*  
19 *Kozelka, Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland, Wooden, Worm*

20  
21 *A - Gehrig, Tillman*

22  
23 *N/A - Cordero*

24  
25 **Dr. Lew moved, Dr. Dubowsky seconded:**

26 **“Resolved, that the AGD believes in the continued existence of the AGD Foundation.**

27  
28 **And be it further,**

29  
30 **Resolved, that the AGD supports the AGD Foundation and its continued success.”**

31  
32 **PASSED**

33  
34 *Y – Acheson, Cheney, Drumm, Dubowsky, Edgar, Gajjar, Gorman, Hanson, Harunani, King, Kozelka, Lew, Low,*  
35 *Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland, Worm*

36  
37 *a - Dyzenhaus, Guter, Wooden*

38  
39 *A - Gehrig, Tillman*

40  
41 *N/A - Cordero*

42  
43 **Dr. Edgar moved, Dr. Smith seconded:**

44 **“Resolved, that the AGD Executive Committee and the Academy of General Dentistry**  
45 **Foundation (AGDF) Executive Committee renegotiate a new fair and equitable contract to**  
46 **promote the projects and mission of the AGDF, and report back to the AGD Board by 18-**  
47 **19 Board Meeting I.”**

1 **PASSED**

2  
3 *Y – Acheson, Cheney, Drumm, Dubowsky, Edgar, Gajjar, Gorman, Hanson, Harunani, King, Kozelka, Lew, Low,*  
4 *Olsen, Shelly, Smith, Uppal, White, Winland, Worm*

5  
6 *a - Dyzenhaus, Guter, Stillwell, Wooden*

7  
8 *A - Gehrig, Tillman*

9  
10 *N/A - Cordero*

11  
12 **AIRBIV2018#11 – Amend Election Guidelines & Bylaws to Eliminate Early Declaration of**  
13 **Candidacy by EC Officers**

14  
15 **Dr. Stillwell moved, Dr. Olsen seconded:**

16  
17 **“Resolved, that AIRBIV2018#11 – Amend Election Guidelines & Bylaws to Eliminate**  
18 **Early Declaration of Candidacy by EC Officers be approved as amended.”**

19  
20 **“Resolved, that the Election Guidelines be amended, at Paragraph VIII (e), so that they**  
21 **read:**

22  
23 **A candidate will formally declare his or her candidacy for the coming year’s election to**  
24 **constituent officers, Regional Directors, members of the Board and council and committee**  
25 **chairs not earlier than ~~the latter of~~ the commencement of the AGD Board meeting III ~~or~~**  
26 **~~January 1st~~ of the year in which the election is held. Notwithstanding this section, all AGD**  
27 **officers are primarily subject to the provisions of the AGD Bylaws, Chapter IX, Section**  
28 **1(B)4, which states "An AGD officer must declare for a new office within the thirty (30)**  
29 **days prior to Board Meeting III , and resign his or her current office effective at the close**  
30 **of the annual meeting pursuant Chapter IX, Section 1, paragraph D. Once an AGD officer**  
31 **declares for a new office, said resignation is irrevocable." Such notice may contain**  
32 **biographical and issue oriented information on his or her candidacy. A candidate shall not**  
33 **announce or circulate petitions for signatures at the preceding annual meeting. Nothing in**  
34 **these guidelines, including the filing deadline for other candidates, shall prohibit a**  
35 **candidate who makes a valid declaration of candidacy from campaigning, subject to all**  
36 **provisions of these guidelines.**

37  
38 **And be it further,**

39  
40 **Resolved, that the Bylaws be amended at Chapter IX B (4), so that they read**

41  
42 **An AGD officer must declare for a new office ~~at least not more than~~ within the thirty (30)**  
43 **days ~~before the start of~~ prior to Board Meeting III, and resign his or her current office**  
44 **effective at the close of the annual meeting, pursuant Chapter IX, Section 1, paragraph D.**  
45 **Once an AGD officer declares for a new office, said resignation is irrevocable.”**

46  
47 **PASSED**



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

4  
5 *N – Gajjar*

6  
7 *a - Harunani, Lew, Winland*

8  
9 *A - Gehrig, Tillman*

10  
11 *N/A - Cordero*

12  
13 **AIRBIV2018#12/AIRBIII2018#22 – Amend Bylaws to Provide Board with Veto Authority**  
14 **over Presidential Appointments**

15  
16 **“Resolved, that AIRBIV2018#12/AIRBIII2018#22 – Amend Bylaws to Provide Board with**  
17 **Veto Authority over Presidential Appointments be postponed until 2018-2019 Board**  
18 **Meeting II.”**

19  
20 **“Resolved, that the Bylaws be amended in the following locations so that they read:**

21  
22 **Chapter IX, Section 2 A 4 a**

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

31  
32 **Chapter XII, Section 10 Z**

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

38  
39  
40 **Chapter XIII, Section 1 A**

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

46  
47 **Chapter XIII, Section 1 D**

1 Each president-elect shall designate, with approval of the Board, one particular council  
2 member to serve as chairperson.

3 The Board may approve or 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  
12 Board with a suitable selection. The term of the Division Coordinator shall be two-years.  
13 No Division Coordinator shall serve more than two successive terms and the appointment  
14 of terms shall be staggered so that only two terms expire on any given year.”

15  
16 **PASSED**

17 *Y –Dubowsky, Dyzenhaus, Gajjar, Gorman, Hanson, Harunani, Lew, Olsen, Uppal, White, Worm*

18  
19 *N – Acheson, Drumm, Guter, King, Low, Shelly, Smith, Stillwell, Winland, Wooden*

20  
21 *a - Cheney, Edgar*

22  
23 *A - Gehrig, Kozelka, Tillman*

24  
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 **~~a. To have the authority with regard to AGD councils to appoint only to those~~**  
43 **~~positions which have an expiration date at the annual meeting at which the president~~**  
44 **~~assumes that office.~~**

45  
46 **~~Council and committee appointments, that are listed in Chapter XIII, Sections 2 and 3 of~~**  
47 **~~these Bylaws, are subject to approval by the Board. The Board may reject specific~~**

1 ~~appointments made by the president-elect until such time as the president-elect provides~~  
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 **subject to the following stipulations:**

12  
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 *Olsen, Shelly, Smith, Stillwell, Uppal, White, Wooden, Worm*

26  
27 *a - Dubowsky, Winland*

28  
29 *A - Gehrig, Kozelka, Tillman*

30  
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 Weclaw Award Recommendation.**

38  
39 **PASSED**

40  
41 *Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, Harunani, King,*  
42 *Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, Winland, White, Wooden, Worm*

43  
44 *A - Gehrig, Kozelka, Tillman*

45  
46 *N/A - Cordero*

47  
48 **Dr. Guter moved, Dr. Worm seconded:**

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

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  
14 **Dr. Worm moved, Dr. Dubowsky seconded:**

15 **“Resolved, that AIRBIV2018#14/AIRBIII2018#03 – 2019 Weclaw Award Recommendation**  
16 **be approved.”**

17  
18 **“Resolved, that the 2019 Dr. Thaddeus V. Weclaw Award be awarded to J. Steven Ratcliff,**  
19 **DDS, MS.”**

20  
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 - Gehrig, Kozelka, Tillman*

31  
32 *N/A - Cordero*

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*

1 N/A - Cordero

2  
3 **Scientific Meeting Council Annual Report**

4  
5 **Dr. Drumm moved, Dr. Hanson seconded:**

6 **“Resolved, that the Scientific Meeting Council Annual Report be transmitted to the House**  
7 **of Delegates.”**

8  
9 **PASSED**

10  
11 *Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gajjar, Gorman, Guter, Hanson, Harunani, King,*  
12 *Lew, Low, Olsen, Shelly, Smith, Stillwell, Uppal, White, Winland, Wooden, Worm*

13  
14 *A - Gehrig, Kozelka, Tillman*

15  
16 *N/A - Cordero*

17  
18 **Budget and Finance Committee Annual Report**

19  
20 **Dr. Smith moved, Dr. Stillwell seconded:**

21 **“Resolved, that the Budget and Finance Committee Annual Report be approved as**  
22 **amended, and transmitted to the House of Delegates.”**

23  
24 **PASSED**

25  
26 *Y – Acheson, Cheney, Drumm, Dubowsky, Dyzenhaus, Edgar, Gorman, Guter, Hanson, Harunani, King, Lew, Low,*  
27 *Olsen, Shelly, Smith, Stillwell, Uppal, White, Wooden, Worm*

28  
29 *a - Gajjar, Winland*

30  
31 *A - Gehrig, Kozelka, Tillman*

32  
33 *N/A - Cordero*

34  
35 **AIRBIV2018#02 – Approve 2019 Budget**

36  
37 **Dr. Shelly moved, Dr. Smith seconded:**

38 **“Resolved, that AIRIV2018#02 – Approve 2019 Budget be approved as amended.”**

39  
40 **“Resolved, that the 2019 Budget with Revenues of \$14,839,221 and Expenses of \$14,839,221**  
41 **netting out to 0 Net Loss from Operations with a Contingency of \$123,497 and capital**  
42 **budget of \$481,522 be approved. And be it further,**

43  
44 **Resolved, that House Policy 2017:150S4-H-11 be rescinded.**

45  
46 ~~**2017:150S4-H-11 “Resolved, that the 2018 budget with Net Income from Operations of \$0**~~  
47 ~~**pre-spending and \$0 post-spending and a capital budget of \$89,500 be approved.**~~

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

8  
9 *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)**  
22 **to take on the ADA HOD resolutions as detailed in their report, PRC Recommendations on**  
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 *a - Stillwell*

34  
35 *A – Cheney, Dubowsky, Edgar, Gorman, Kozelka, Shelly, Tillman, Uppal*

36  
37 *N/A – Cordero*

 **ACADEMY  
of GENERAL  
DENTISTRY**  
**2018 Delegates and Alternates**  
*(Updated 10-22-18)*

1  
2  
3  
4

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

1 Lorna G. Flamer-Caldera, DDS, FAGD  
2 31 Washington Square W, Suite 1F  
3 New York, NY 10011-9126  
4  
5 James R. Keenan, DDS, MAGD  
6 2375 Ocean Avenue, Apt. 6H  
7 Brooklyn, NY 11229-3563  
8  
9 Janice K. Pliszczak, DDS, MAGD  
10 404 Gertrude Avenue  
11 Solvay, NY 13209-1518  
12  
13 Seung-Hee Rhee, DDS, MAGD  
14 5 E. 22<sup>nd</sup> Street, #29A  
15 New York, NY 10010-5331  
16  
17 Shahram Shekib, DDS, FAGD  
18 2178 63<sup>rd</sup> Street  
19 Brooklyn, NY 11204-3058  
20  
21 Teresa Skalyo, DDS, FAGD  
22 418 Skuse Road  
23 Geneva, NY 14456  
24  
25 Berry Stahl, DMD  
26 4422 3<sup>rd</sup> Avenue  
27 Mills Building  
28 Bronx, NY 10457-2545  
29  
30 Binod K. Verma, DDS, MAGD  
31 5904 Junction Boulevard  
32 Elmhurst, NY 11374  
33  
34 **Alternates**  
35 Louis G. Bartimmo, DMD  
36 535 Plandome Road  
37 Manhasset, NY 11030-1974  
38  
39 Ira A. Levine, DDS, MAGD  
40 111 N. Central Avenue, Suite 280  
41 Hartsdale, NY 10530-1938  
42  
43 Robert Margolin, DDS, FAGD  
44 1 Fountain Lane, Apt. 3L  
45 Scarsdale, NY 10583-4656  
46

47 **REGION 3**  
48 **Pennsylvania**  
49 ***Delegates***  
50 Katherine S. Dangler, DDS, MAGD  
51 1500 12<sup>th</sup> Avenue  
52 Altoona, PA 16601-4812  
53  
54 Ann L. Hunsicker-Morrissey, DMD, MAGD  
55 1213 Main Street  
56 Hellertown, PA 18055-1320  
57  
58 Raymond J. Johnson, DMD, FAGD  
59 101 Oak Street  
60 Warren, PA 16365  
61  
62 Richard D. Knowlton, DMD, MAGD  
63 102 W. High Street  
64 Elizabethtown, PA 17022-2019  
65  
66 Leigh A. Jacopetti-Kondraski, DMD  
67 1073 Oak Street  
68 Pittston, PA 18640-3716  
69  
70 Michael K. Kaner, DMD, FAGD  
71 137 W Street Rd  
72 Feasterville Trevose, PA 19053-4168  
73  
74 Kurt J. Laemmer, DMD, MAGD  
75 197 Interstate Parkway  
76 Bradford, PA 16701-1013  
77  
78 Hema R. Nair, DMD, MAGD  
79 1102 Baltimore Pike, Suite 203  
80 Glen Mills, PA 19342-1058  
81  
82 ***Alternates***  
83  
84 Eric N. Shelly, DMD, MAGD  
85 403 N. 5 Points Road  
86 West Chester, PA 19380-4632  
87  
88  
89



1 **REGION 4**  
2 **New Jersey**  
3 ***Delegates***  
4 Boris Alvarez, DDS, FAGD  
5 20 Mount Vernon Square  
6 Verona, NJ 07044-2924  
7  
8 Elizabeth A. Clemente, DDS, MAGD  
9 15 Milford Place  
10 Skillman, NJ 08558-2335  
11  
12 Murtuza Jaffari, DDS  
13 300 Lexington Road, Suite 220  
14 Swedesboro, NJ 08085-1278  
15  
16 Narpat S. Jain, DMD, MAGD  
17 101 Piermont Road, Floor 2  
18 Tenafly, NJ 07670-1023  
19  
20 Arlene O'Brien, DMD  
21 10 Douglass Drive  
22 Princeton, NJ 08540-9510  
23  
24 George J. Schmidt, DMD, FAGD  
25 197 Ridgedale Avenue, Suite 245  
26 Cedar Knolls, NJ 07927-2107  
27  
28 Jeffrey J. Urban, DMD  
29 1608 Route 88, Suite 111  
30 Brick, NJ 08724-3009  
31  
32 Asim R. Zaidi, DMD  
33 429 State Route 35  
34 Red Bank, NJ 07701-5914  
35  
36 ***Alternates***  
37 Jaafar T. Ali, DDS  
38 593 Birch Avenue  
39 Westfield, NJ 07090-3042  
40  
41 Joseph A. Battaglia, DMD, FAGD  
42 516 Hamburg Turnpike, Suite 9  
43 Wayne, NJ 07470-2063  
44  
45

46 Scott M. Dubowsky, DMD, FAGD  
47 12 W. 22<sup>nd</sup> Street  
48 Bayonne, NJ 07002-3616  
49  
50 Shari L. Hyder, DMD, MAGD  
51 407 White Horse Pike  
52 Oaklyn, NJ 08107-1451  
53  
54 Muna N. Khan, DDS  
55 35 Beaverson Boulevard, Suite 2A  
56 Brick, NJ 08723-7855  
57  
58 Laura Sharbash, DDS  
59 3169 Park Avenue  
60 South Plainfield, NJ 07080-5234  
61  
62 **REGION 5**  
63 **Delaware, District of Columbia,**  
64 **Maryland, Virginia**  
65 ***Delegates***  
66 Laura A. Dougherty, DDS  
67 1601 Milltown Road, Suite 25  
68 Wilmington, DE 19808-4084  
69  
70 Sheila M. Samaddar, DDS  
71 1313 S. Capitol Street SW  
72 South Capitol Smile Center  
73 Washington, DC 20003-3526  
74  
75 Steven G. Feldman, DDS  
76 15321 Carrolton Road  
77 Rockville, MD 20853-1702  
78  
79 Gigi Meinecke, DMD, FAGD  
80 10520 Macarthur Boulevard  
81 Potomac, MD 20854-3837  
82  
83 Eric L. Morse, DDS  
84 112 W. Ostend Street, Apt. B  
85 Baltimore, MD 21230-3711  
86  
87 Charles A. Young, DDS, FAGD  
88 15 Malibu Court  
89 Baltimore, MD 21204-2047  
90

1 Bruce E. Yuille, DDS, MAGD  
2 700 Geipe Road, Suite 270  
3 St. Agnes Health Care Center  
4 Catonsville, MD 21228-4176  
5  
6 Mohamed H. Attia, DDS, MAGD  
7 6420 Grovedale Drive, Suite 100A  
8 Alexandria, VA 22310-2599  
9  
10 Jenni C. Bobbio, DDS, FAGD  
11 42206 Bunker Woods Place  
12 Ashburn, VA 20148-6434  
13  
14 Gregory Bowles, DDS, MAGD  
15 1225 Kempsville Road, #64398  
16 Virginia Beach, VA 23467-1218  
17  
18 Stuart A. Broth, DDS, MAGD  
19 3400 Wicklow Lane  
20 Richmond, VA 23236-1328  
21  
22 Jeena E. Devasia, DDS  
23 6455 Old Chesterbrook Road  
24 McLean, VA 22101-4741  
25  
26 Bradley D. Hammitt, DDS  
27 911 Manchester Court  
28 Charlottesville, VA 22901-1756  
29  
30 Christine D. Howell, DDS  
31 102 Western Avenue  
32 Suffolk, VA 23434-4434  
33  
34 **Alternates**  
35 Michael D. Matthias, DMD, MAGD  
36 3801 Kennett Pike, Suite E207  
37 Wilmington, DE 19807-2340  
38  
39 James K. Feldman, DDS  
40 4707 Connecticut Avenue NW, Apt. 108  
41 Washington, DC 20008-5619  
42  
43 Angela D. Marwaha, DMD  
44 6318 Stoneham Lane  
45 McLean, VA 22101-2345

46 **REGION 6**  
47 **Kentucky, Missouri, Tennessee, West**  
48 **Virginia**  
49 ***Delegates***  
50 Darren S. Greenwell, DMD, MAGD  
51 169 E. Lincoln Trail Boulevard  
52 Radcliff, KY 40160-1253  
53  
54 Richard J. Alvarez, DDS, FAGD  
55 183 Royal Dornoch Drive  
56 Branson, MO 65616  
57  
58 Philip Batson, DDS  
59 409 Vandiver Drive  
60 Building 4, Suite 101  
61 Columbia, MO 65202-3754  
62  
63 Dennis Nguyen, DDS  
64 1923 Rex Avenue, Apt. 61  
65 Joplin, MO 64801-5980  
66  
67 Jian Huang, DDS, BMS, MAGD  
68 2810 Bransford Avenue, Suite B  
69 Nashville, TN 37204-3102  
70  
71 Keith D. Gilmore, DDS, MAGD  
72 493 Henslee Drive  
73 Dickson, TN 37055-2166  
74  
75 Gary R. Woodall, DDS, MAGD  
76 161 Capital Drive, Suite 201  
77 Knoxville, TN 37922-3581  
78  
79 Steven A. Ghareeb, DDS, FAGD  
80 1203 Jefferson Road  
81 South Charleston, WV 25309-9732  
82  
83 ***Alternates***  
84 **Geoffrey S. Ball, DMD, MAGD**  
85 **2105 Crossfield Drive**  
86 **Elizabethtown, KY 42701-7831**  
87  
88 **Todd T. Cochran, DMD, FAGD**  
89 **5520 Sonora Road**  
90 **Hodgenville, KY 42748**

1 Richard B. Alvarez, DDS  
2 14303 State Highway 38  
3 Marshfield, MO 65706-8952  
4  
5 Anthony S. Carroccia, DDS, MAGD,  
6 ABGD  
7 2088 Lowes Drive, Suite C  
8 St. Bethlehem Dental Care  
9 Clarksville, TN 37040-1635  
10  
11 Anthony A. Martin, DMD, MAGD  
12 440 Cherokee Boulevard  
13 Knoxville, TN 37919  
14  
15 Sami M. Ghareeb, DDS, MAGD  
16 P.O. Box 566  
17 178 Main Street  
18 Pooca, WV 25159-0566  
19  
20 Bruce L. Cassis, DDS, MAGD  
21 P.O. Box 926  
22 Fayetteville, WV 25840-0926  
23  
24 **REGION 7**  
25 **Indiana, Ohio**  
26 ***Delegates***  
27 Charles W. Bartholomew, DDS, FAGD  
28 3415 S. Lafountain Street, Suite C  
29 Kokomo, IN 46902-3826  
30  
31 James M. Lindsey, DDS, FAGD  
32 2516 Locust Lane  
33 Kokomo, IN 46902-2954  
34  
35 Thomas J. Steckbeck, DDS, FAGD  
36 8007 S. Meridian Street, Suite 4  
37 Indianapolis, IN 46217-2901  
38  
39 David G. Austin, DDS  
40 3600 Olentangy River Road, Suite B1  
41 Columbus, OH 43214-3468  
42  
43 William G. Leffler, DDS, FAGD  
44 2300 Wales Avenue NW, Suite 205  
45 Massillon, OH 44646-2323

46 Mehrdad Safavian, DDS  
47 65 E. State Street, Suite E  
48 Columbus, OH 43215-4259  
49  
50 David W. Schlosser, DDS, MAGD  
51 3506 Darrow Road  
52 Stow, OH 44224-4009  
53  
54 Tyler L. Scott, DDS  
55 633 N. Union Street  
56 Loudonville, OH 44842-1074  
57  
58 ***Alternates***  
59 Michael A. Gordon, DDS, MAGD  
60 829 Main Street  
61 Schererville, IN 46375-1100  
62  
63 Hans P. Guter, DDS, FAGD  
64 598 Northridge Road  
65 Circleville, OH 43113-1150  
66  
67 **REGION 8**  
68 **Illinois**  
69 ***Delegates***  
70 Spencer R. Bloom, DDS  
71 5530 W. Montrose Avenue  
72 Chicago, IL 60641-1330  
73  
74 Dawood Harunani, DDS, MAGD  
75 301 W. Washington Street  
76 Oregon, IL 61061-1621  
77  
78 William M. Lawley, DDS, MAGD  
79 10704 31<sup>st</sup> Street  
80 Westchester, IL 60154-5111  
81  
82 Charles F. Martello, DDS, MAGD  
83 106 W. Nebraska Street, #635  
84 Frankfort, IL 60423-1420  
85  
86 Brenden D. Moon, DMD, FAGD  
87 4529 Brandywine Lane  
88 Quincy, IL 62305-9047

1 Cheryl L. Mora, DDS, MAGD  
2 888 Creek Bend Drive  
3 Vernon Hills, IL 60061-3301  
4  
5 Ryan R. Vahdani, DDS, FAGD  
6 3450 Lacey Road  
7 Downers Grove, IL 60515-5430  
8  
9 Seymour Wachtenheim, DDS, MAGD  
10 7031 W. Touhy Avenue, Apt. 306  
11 Niles, IL 60714-4394  
12  
13 Larry N. Williams, DDS, MAGD, ABGD  
14 4934 Lunt Avenue  
15 Skokie, IL 60077-3538  
16  
17 *Alternates*  
18 Randal P. Ashton, DDS  
19 517 W. Fairchild Street  
20 Danville, IL 61832-3801  
21  
22 Susan Bordenave-Bishop, DMD, MAGD  
23 7314 N. Edgewild Drive  
24 Peoria, IL 61614-2114  
25  
26 Robert S. Kozelka, DDS, MAGD  
27 101 S. Washington Avenue Suite 124  
28 Park Ridge, IL 60068-4258  
29  
30 Theresa B. Lao, DDS, FAGD  
31 3450 Lacey Road, Room 407  
32 Downers Grove, IL 60515-5430  
33  
34 ~~Jaelyn P. MacDonald, DMD~~  
35 ~~1700 W. Bluebonnet Drive, #15103~~  
36 ~~Peoria, IL 61615~~  
37  
38 Daniel D. Pagel, DMD  
39 150 Forest Avenue, #2001  
40 Oak Park, IL 60301  
41  
42 Brian M. Weinberg, DMD  
43 3355 N. Kedzie Avenue  
44 Chicago, IL 60618

45 George R. Zehak, DDS, MAGD  
46 6731 26<sup>th</sup> Street  
47 Berwyn, IL 60402-2590  
48  
49 **REGION 9**  
50 **Michigan, Wisconsin**  
51 *Delegates*  
52 Anthony R. Bielkie, DDS, FAGD  
53 51725 Van Dyke Avenue  
54 Shelby Township, MI 48316-4451  
55  
56 Jessica J. Brisbois, DDS  
57 20916 Meadowlark Street  
58 Farmington, MI 48336-5058  
59  
60 Dennis G. Charnesky, DDS, MAGD  
61 4101 John R. Road, Suite 100  
62 Troy, MI 48085-3647  
63  
64 Colleen B. DeLacy, DDS, FAGD  
65 7305 Huron Avenue  
66 P.O. Box 700  
67 Lexington, MI 48450-8325  
68  
69 Nahid A. Kashani, DDS  
70 17129 Tall Pines Court  
71 Northville, MI 48168-1883  
72  
73 J. Michael Owen, DDS, FAGD  
74 42430 W. 12 Mile Road  
75 Novi, MI 48377-3028  
76  
77 Samer G. Shamoan, DDS, MAGD  
78 600 Eleven Mile Road  
79 Berkley, MI 48072-3027  
80  
81 David A. Susko, DDS  
82 20737 E. 13 Mile Road  
83 Roseville, MI 48066-4503  
84  
85 Edwin T. Batchelor, DDS, FAGD  
86 2602 Crest Line Drive  
87 Madison, WI 53704-2836

1 Louis C. Boryc, DDS, FAGD  
2 S76W18538 Kingston Drive  
3 Muskego, WI 53150-9276  
4  
5 Virginia G. Scott, DDS, MAGD  
6 W7347 Polinske Road  
7 Portage, WI 53901-9151  
8  
9 *Alternates*  
10 Fares M. Elias, DDS, FAGD  
11 5353 Woodview Drive  
12 Bloomfield Hills, MI 48302-2571  
13  
14 John V. Machi, DDS  
15 290 Ohio Street  
16 Oshkosh, WI 54902  
17  
18 **REGION 10**  
19 **Iowa, Minnesota, Nebraska, North**  
20 **Dakota, South Dakota**  
21 *Delegates*  
22 Roberto A. Moreno, DDS, MAGD  
23 201 W. 16<sup>th</sup> Street  
24 West Liberty, IA 52776-1064  
25  
26 Dona W. Prince, DDS, MAGD  
27 4220 Sergeant Road, Suite 100  
28 Sioux City, IA 51106-4648  
29  
30 Daniel T. Johnson, Jr., DDS, FAGD  
31 1757 Saunders Avenue  
32 Saint Paul, MN 55116-2432  
33  
34 John J. Keller, DDS, MAGD  
35 552 E. Main Street  
36 Anoka, MN 55303-2529  
37  
38 Matthew R. Serbousek, DMD  
39 368 N. Webb Road, Suite 1  
40 Grand Island, NE 68803  
41  
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

47 Mark R. Bain, DDS  
48 1416 18<sup>th</sup> Avenue NE  
49 Aberdeen, SD 57401-1516  
50  
51 *Alternate*  
52 Bradley J. Anderson, DDS, FAGD  
53 4521 38<sup>th</sup> Avenue S  
54 Fargo, ND 58104-8507  
55  
56 **REGION 11**  
57 **Alaska, Idaho, Montana, Oregon,**  
58 **Washington**  
59 *Delegates*  
60 Ghazal A. Ringler, DMD  
61 4951 Business Park Boulevard  
62 Anchorage, AK 99503  
63  
64 **Russell R. Jensen, DMD**  
65 **3270 N. Maple Grove Road**  
66 **Boise, ID 83704-4214**  
67  
68 Leslie A. Hayes, DDS, MAGD  
69 1125 W. Kagy Boulevard, Suite 300  
70 Bozeman, MT 59715-5879  
71  
72 Scott S. Hansen, DMD, MAGD  
73 Hansen Family Dentistry  
74 6201 SE Harmony Road  
75 Milwaukie, OR 97222  
76  
77 Howard E. Hilman, DMD  
78 1240 SE 122<sup>nd</sup> Avenue  
79 Portland, OR 97233-1202  
80  
81 **Martha E. Rich, DMD, FAGD**  
82 **833 SW 11<sup>th</sup> Avenue, Suite 405**  
83 **Portland, OR 97205-2118**  
84  
85 **Ravi S. Sinha, DDS**  
86 **1238 SE 122<sup>nd</sup> Avenue**  
87 **Portland, OR 97233-1202**

1 Kimberly R. Wright, DMD, MAGD  
2 1554 Garden Street  
3 P.O. Box 589  
4 West Linn, OR 97068-3278  
5  
6 Puneet S. Aulakh, DDS, MAGD  
7 1808 Richards Road, Suite 101  
8 Bellevue, WA 98005-3982  
9  
10 Teresa K. Kang, DDS  
11 12332 120<sup>th</sup> Avenue NE  
12 Kirkland, WA 98034-6926  
13  
14 Theron A. Manson, DDS, FAGD  
15 9750 NE 120<sup>th</sup> Place, Suite 8  
16 Kirkland, WA 98034-4207  
17  
18 Dzon M. Nguyen, DDS, MAGD  
19 1421 NW 85<sup>th</sup> Street  
20 Seattle, WA 98117-4298  
21  
22 Carl W. Youngquist, DDS, MAGD  
23 1911 19<sup>th</sup> Street SE  
24 Puyallup, WA 98372-7123  
25  
26 *Alternates*  
27 Matthew J. West, DMD, FAGD  
28 10467 Fox Farm Trail  
29 Juneau, AK 99801-8548  
30  
31 Timothy M. Lawhorn, DDS, FAGD  
32 16111 Rocky Mountain Road, Suite E  
33 Belgrade, MT 59714-8037  
34  
35 ~~Stefanie Beckley, DMD~~  
36 ~~4813 Parkview Drive, Apt. G~~  
37 ~~Lake Oswego, OR 97035-4461~~  
38  
39 Linda J. Edgar, DDS, MAGD  
40 220 SW 292<sup>nd</sup> Street  
41 Federal Way, WA 98023-3502  
42  
43 Timothy A. Hess, DDS, MAGD  
44 1314 8<sup>th</sup> Street NE, Suite 101  
45 Auburn, WA 98002-5748  
46

47 Gary E. Heyamoto, DDS, MAGD  
48 15657 NE 190<sup>th</sup> Street  
49 Woodinville, WA 98072  
50  
51 **REGION 12**  
52 **Arkansas, Kansas, Louisiana, Mississippi,**  
53 **Oklahoma**  
54 *Delegates*  
55 John Pardo, DDS  
56 17585 E. Wyman Road  
57 Fayetteville, AR 72701-9561  
58  
59 Mark H. Armfield, DDS  
60 2814 Ohio Street  
61 Augusta, KS 67010-2361  
62  
63 Kristopher P. Rappold, DDS, MAGD  
64 1721 Peniston Street  
65 New Orleans, LA 70115-4630  
66  
67 Jeffrey R. Richardson, DDS  
68 4913 Elmwood Parkway  
69 Metairie, LA 70003-2628  
70  
71 Steven M. Porter, DDS  
72 301 Plantation Drive  
73 Columbus, MS 39705-1126  
74  
75 Erin M. Sexson, DDS  
76 1113 Huntington Avenue  
77 Oklahoma City, OK 73116-6212  
78  
79 *Alternates*  
80 ~~Carl S. Plyler, DDS, FAGD~~  
81 ~~119 Elm~~  
82 ~~P.O. Box 4~~  
83 ~~Glenwood, AR 71943-9213~~  
84  
85 ~~K. David Stillwell, DDS, MAGD~~  
86 ~~108 Marseille Drive~~  
87 ~~Maumelle, AR 72113-7246~~  
88  
89 David A. Bowman, DDS  
90 713 Main Street  
91 Seneca, KS 66538-1931

1 John W. Portwood, Jr., DDS, MAGD  
2 9069 Siegen Lane  
3 Baton Rouge, LA 70810-1951  
4  
5 Frank L. Conaway, DMD, MAGD  
6 292 Hancock Square Drive  
7 Bay Saint Louis, MS 39520-1634  
8  
9 **REGION 13**  
10 **California**  
11 ***Delegates***  
12 Samer S. Alassaad, DDS, FAGD  
13 4204 Vistosa Street  
14 Davis, CA 95618-7120  
15  
16 Myron J. Bromberg, DDS  
17 7012 Reseda Boulevard, Suite G  
18 Reseda, CA 91335-4281  
19  
20 Chethan Chetty, DDS, FAGD  
21 2231 Swiftwater Way  
22 Glendora, CA 91741-4606  
23  
24 Cheryl D. Goldasich, DDS, FAGD  
25 3610 Lomita Boulevard, Suite 203  
26 Torrance, CA 90505-3919  
27  
28 Kirk M. Hobock, DDS, MAGD  
29 32382 del Obispo Street, Suite C2  
30 San Juan Capistrano, CA 92675-4029  
31  
32 Erika Kullberg, DMD  
33 4944 Cass Street, Unit 801  
34 San Diego, CA 92109-2043  
35  
36 Anita Rathee, DDS, FAGD  
37 23101 Sherman Place, Suite 415  
38 West Hills, CA 91307-2037  
39  
40 Harriet F. Seldin, DMD  
41 3737 Moraga Avenue, Suite B113  
42 San Diego, CA 92117-5356

43 Ricardo A. Suarez, DDS, FAGD  
44 15732 Mar Vista Street  
45 Whittier, CA 90605-1325  
46  
47 James H. Thompson, DMD, FAGD  
48 7424 Jackson Drive, Suite 3  
49 San Diego, CA 92119-2324  
50  
51 Chirag Vaid, DDS  
52 4130 Saint Andrews Drive  
53 Stockton, CA 95219-1865  
54  
55 Eric Wong, DDS, MAGD  
56 P.O. Box 22417  
57 Sacramento, CA 95822-0417  
58  
59 ***Alternates***  
60 Guy E. Acheson, DDS, MAGD  
61 American River Dental Center  
62 10350 Coloma Road  
63 Rancho Cordova, CA 95670  
64  
65 Howard H. Chi, DMD, MAGD  
66 6529 Inglewood Avenue, Suite B1  
67 Stockton, CA 95207-3864  
68  
69 **REGION 14**  
70 **Arizona, Colorado, Hawaii, Nevada, New**  
71 **Mexico, Utah, Wyoming**  
72 ***Delegates***  
73 Mai-Ly Duong, DMD, FAGD  
74 859 N. Harmony Avenue  
75 Gilbert, AZ 85234-8020  
76  
77 Dana E. Onet, DDS  
78 8868 W. Bell Road, #362  
79 Peoria, AZ 85382-4931  
80  
81 Onika R. Patel, DMD, FAGD  
82 11981 E. Becker Lane  
83 Scottsdale, AZ 85259-4142  
84  
85 Dennis L. Burgner, DDS, MAGD  
86 P.O. Box 988  
87 Parker, CO 80134-0988

1 Sheila N. O’Grady-Stille, DMD, MAGD  
2 5307 S. Havana Court  
3 Englewood, CO 80111-3815  
4  
5 Sandra Montes, DDS  
6 3215 Rio Madre Court SW  
7 Albuquerque, NM 87121-9344  
8  
9 Summer Kleidosty, DMD  
10 P.O. Box 17893  
11 Reno, NV 89511-1033  
12  
13 Jason Eaton, DDS, MAGD  
14 680 Liston Circle  
15 Kaysville, UT 84037-1562  
16  
17 Michael R. Keim, DDS, MAGD  
18 1749 S. Boxelder Street  
19 Casper, WY 82604-3538  
20  
21 *Alternates*  
22 Charles D. Tatlock, DDS, MAGD  
23 405 Tulane Drive SE  
24 Albuquerque, NM 87106-1417  
25  
26 Jennifer E. McClanahan, DMD  
27 2815 Show Jumper Lane  
28 Reno, NV 89521  
29  
30 **REGION 15-16**  
31 **Alberta, Atlantic Provinces, British**  
32 **Columbia, Ontario, Quebec**  
33 *Delegates*  
34 Jennifer T. Nguyen, DDS  
35 912 Goshawk Point NW  
36 Edmonton, AB T5S 0H6  
37  
38 Lary F. Trites, DDS  
39 6 Allison Avenue  
40 Sackville, NB E4L 3L9  
41  
42 Joseph A. Belsito, DDS, FAGD  
43 2095 Wyandotte Street W  
44 Windsor, ON N9B 1J8

45 Elio F. Filice, DDS, MAGD  
46 1685 Main Street W, Unit 1-B  
47 Hamilton, ON L8S 1G5  
48  
49 Frank C. Infusini, DDS, FAGD  
50 3200 Dufferin Street, Unit 15B  
51 Toronto, ON M6A 3B2  
52  
53 Kirandip K. Johal, DDS  
54 84 Nova Scotia Road  
55 Brampton, ON L6Y 5K1  
56  
57 Antonio Mancuso, DDS, MAGD  
58 547 Thorold Road, Unit 2  
59 Welland, ON L3C 3W9  
60  
61 Sarah A. Mancuso, DDS  
62 547 Thorold Road, Unit 2  
63 Welland, ON L3C 3W9  
64  
65 Gulam Walji, DDS  
66 21 Heathmore Court  
67 Markham, ON L3R 8J2  
68  
69 Faraj Hanna Alkass, DMD  
70 3535 Queen-Mary, #218  
71 Montreal, QC H3V 1H8  
72  
73 *Alternates*  
74 Kulwant S. Turna, DDS  
75 110 Pertosa Drive, Unit 1  
76 Brampton, ON L6X 5E9  
77  
78 Bashar Shagoury, DDS, MAGD  
79 1100 Beaumont Avenue, Suite 404  
80 Mont-Royal, QC H3P 3H5  
81  
82 **REGION 17**  
83 **Air Force, Army, Navy, Public Health,**  
84 **Veterans Administration**  
85 *Delegates*  
86 John A. Safar, DDS, MAGD, ABGD  
87 12346 Magnolia Spring  
88 San Antonio, TX 78253-6381



1 Dragos Stefan-Dogar, DDS, FAGD, ABGD  
2 1301 Shamrock Court  
3 Warrensburg, MO 64093  
4  
5 Jarom Hansen, DMD  
6 117 Sycamore Way  
7 Fort Knox, KY 40121  
8  
9 John Clay Hastings, DMD  
10 401 Quaker Meadows Court  
11 Holly Springs, NC 27540  
12  
13 Alain Ouellet, DMD, FAGD, ABGD  
14 50 Rue Des Migrateurs  
15 Gatineau, QC J9A 2X7  
16  
17 Jared A. Geller, DMD, FAGD  
18 401 Grandin Avenue  
19 Rockville, MD 20850-4142  
20  
21 Doris K. Lam, DDS, FAGD  
22 400 Russell Avenue  
23 Building 41 - Dental Clinic  
24 Belle Chasse, LA 70143  
25  
26 Thu N. Luu, DMD, FAGD, ABGD  
27 13513 Moonlight Trail Drive  
28 Silver Spring, MD 20906-6701  
29  
30 Li-Kuei G. Hung, DDS, FAGD  
31 218 239<sup>th</sup> Way SE  
32 Sammamish, WA 98074-3685  
33  
34 Juan A. Villafane-Hernandez, DMD  
35 6002 Auburndale Avenue, Unit B  
36 Dallas, TX 75205  
37  
38 *Alternates*  
39 David L. Mapes, DDS  
40 106 Honeycomb Drive, Unit C  
41 Boerne, TX 78006  
42  
43 Demarcio L. Reed, DMD, FAGD  
44 100 First Street, Apt. 117  
45 Rockville, MD 20851

46 Melissa Tucker, DDS, FAGD  
47 1337 NW Still Water Trail  
48 Lawton, OK 73507-5053  
49  
50 Justin L. Rogers, DMD, FAGD  
51 13513 Moonlight Trail Drive  
52 Silver Spring, MD 20906-6701  
53  
54 **REGION 18**  
55 **Texas**  
56 ***Delegates***  
57 Dean N. Armstrong, DDS, MAGD  
58 3512 Farwell Drive  
59 Amarillo, TX 79109-4038  
60  
61 Douglas W. Bogan, DDS, FAGD  
62 791 Town and Country Boulevard  
63 Suite 222  
64 Houston, TX 77024-3978  
65  
66 Jennifer J. Bone, DDS, MAGD  
67 710 Hill Country Drive, Suite 1  
68 Kerrville, TX 78028-6168  
69  
70 Ben A. Bratcher, DDS, MAGD  
71 240 E. Highway 243  
72 Canton, TX 75103-2315  
73  
74 Ralph A. Cooley, DDS, FAGD  
75 7500 Cambridge Street, Suite 5330  
76 UT Health School of Dentistry  
77 Houston, TX 77054-2032  
78  
79 Brooke Elmore, DDS, FAGD  
80 713 Chatham Road  
81 Belton, TX 76513-6707  
82  
83 Jeffrey B. Geno, DDS, MAGD  
84 6011 W. Main Street. Suite A101  
85 League City, TX 77573-6953  
86  
87 Alex Gonzalez, DDS, MAGD  
88 10965 Ben Crenshaw Drive  
89 Building 4B  
90 El Paso, TX 79935-3021

1 Melissa Lent Brown, DDS, FAGD  
2 5422 Judalon Lane  
3 Houston, TX 77056-7225  
4  
5 Hanna E. Lindskog, DDS, FAGD  
6 1120 W. Temple Street  
7 Houston, TX 77009-5240  
8  
9 Anne C. Lyon, DDS, FAGD  
10 7002 Manchaca Road  
11 Austin, TX 78745-5352  
12  
13 Christina Meiners, DDS  
14 140 Merry Trail  
15 San Antonio, TX 78232-1329  
16  
17 Bryan T. Moore, DDS  
18 800 Timberwood Lane  
19 Fairview, TX 75069-9181  
20  
21 Sarah Tovar, DDS, FAGD  
22 23526 Edens Canyon  
23 San Antonio, TX 78255  
24  
25 Marc J. Worob, DDS, FAGD  
26 11623 Angus Road, Suite 16  
27 Austin, TX 78759-4041  
28  
29 **Alternates**  
30 Dan P. McCauley, DDS, FAGD  
31 1603 N. Jefferson Avenue  
32 Mount Pleasant, TX 75455-2329  
33  
34 Akshay Thusu, DDS  
35 5919 Seneca Drive  
36 San Antonio, TX 78238-2344  
37  
38 David M. Tillman, DDS, MAGD  
39 747 8<sup>th</sup> Avenue, Suite C  
40 Ft. Worth, TX 76104-2503  
41  
42

43 **REGION 19**  
44 **Alabama, Georgia, North Carolina, South**  
45 **Carolina**  
46 ***Delegates***  
47 Gordon R. Isbell, IV, DMD  
48 241 S. 4<sup>th</sup> Street  
49 Gadsden, AL 35901-4213  
50  
51 Derrick D. Mendez, DMD  
52 146 County Road 80  
53 Clanton, AL 35045-8041  
54  
55 Gary L. Myers, DMD, MAGD  
56 531 Creekview Circle  
57 Birmingham, AL 35226-3417  
58  
59 John P. Gale, DMD  
60 3380 Old Jefferson Road  
61 Athens, GA 30607-1480  
62  
63 Kenneth A. Gilbert, DDS, FAGD  
64 1275 McConnell Drive, Suite G  
65 Decatur, GA 30033-3505  
66  
67 Ricky Lane, DDS, MAGD  
68 1066 Bermuda Run  
69 Statesboro, GA 30458-0858  
70  
71 Amit P. Patel, DMD  
72 1874 Chamdun Place  
73 Atlanta, GA 30341-1767  
74  
75 Erin H. Pickwick, DMD  
76 2023 Georgia Highway 20, Suite 203  
77 Grayson, GA 30017  
78  
79 M. Usman Sajid, DDS  
80 3301 Vintage Circle SE  
81 Smyrna, GA 30080-4596  
82  
83 Woodson B. Bolinger, DDS, FAGD  
84 101 N. Main Street  
85 Weaverville, NC 28787-8444

1 Tracy D. Johnson, DDS  
2 Dowd Family Dentistry  
3 309 McArthur Road  
4 Fayetteville, NC 28311-6921  
5  
6 Cammie T. Morris, DDS  
7 126 SE 3<sup>rd</sup> Street  
8 Oak Island, NC 28465-6701  
9  
10 Alex P. Pence, DDS, FAGD  
11 46 Buckhorn Gap Road  
12 Candler, NC 28715  
13  
14 Theodore M. Roberson, II  
15 340 Dabney Drive  
16 Henderson, NC 27536-4036  
17  
18 Callan D. White, DDS  
19 1011 Tunnel Road, Suite 140  
20 Asheville, NC 28805-2059  
21  
22 William A. Burn, DMD, MAGD  
23 P.O. Box 2117  
24 Irmo, SC 29063-7117  
25  
26 Rocky L. Napier, DMD  
27 143 Trafalgar Street SW  
28 Aiken, SC 29801-3760  
29  
30 Ronald S. Wilson, DMD  
31 140 Mall Connector Road  
32 Greenville, SC 29607-3582  
33  
34 *Alternates*  
35 William E. Chesser, DMD, MAGD  
36 5002 Woodland Forrest Drive  
37 Tuscaloosa, AL 35405  
38  
39 Kim E. Stiegler, DMD, MAGD  
40 1151 Hillcrest Road, Suite A  
41 Mobile, AL 36695-3907  
42  
43 Phillip H. Durden, DMD, MAGD  
44 104 Moores Grove Road  
45 Winterville, GA 30683-1506

46 Suvidha Sachdeva, DDS  
47 470 Wembley Circle  
48 Sandy Springs, GA 30328-6754  
49  
50 Jennifer S. Bell, DDS, FAGD  
51 5245 Sunset Lake Road  
52 Holly Springs, NC 27540-3793  
53  
54 W. Carter Brown, DMD, FAGD  
55 1422 S. Jetties Court  
56 Mount Pleasant, SC 29466-7993  
57  
58 Scott R. Cayouette, DMD, FAGD  
59 1040 Savannah Highway  
60 Charleston, SC 29407-7804  
61  
62 Christopher T. Griffin, DMD, FAGD  
63 150 Cambridge Avenue W  
64 Greenwood, SC 29646-2234  
65  
66 **REGION 20**  
67 **Florida, Puerto Rico**  
68 *Delegates*  
69 John V. Gammichia, DMD, FAGD  
70 450 Errol Parkway  
71 Apopka, FL 32712-2627  
72  
73 Harvey P. Gordon, DDS, MAGD  
74 4949 SW 33<sup>rd</sup> Way  
75 Fort Lauderdale, FL 33312-7927  
76  
77 Toni-Anne Gordon, DMD  
78 11250 Point Sylvan Circle, Apt. H  
79 Orlando, FL 32825  
80  
81 Laurence A. Grayhills, DMD, MAGD  
82 250 Professional Way  
83 Wellington, FL 33414-6391  
84  
85 Naresh A. Kalra, DDS  
86 3306 W. Kennedy Boulevard  
87 Tampa, FL 33609-2904

1 Andrew P. Martin, DMD, MAGD  
2 11626 SW 6<sup>th</sup> Lane  
3 Gainesville, FL 32607-1139  
4  
5 Douglas L. Massingill, DDS, MAGD,  
6 ABGD  
7 104 Overoaks Place  
8 Sanford, FL 32771-7118  
9  
10 Ray A. Morse, DMD, MAGD  
11 227 Southwood Drive  
12 Panama City, FL 32405-4905  
13  
14 Merlin P. Ohmer, DDS, MAGD  
15 1126 1<sup>st</sup> Street N, #201  
16 Jacksonville Beach, FL 32250  
17  
18 Bipin J. Sheth, DDS, MAGD  
19 5239 Coconut Creek Parkway  
20 Margate, FL 33063-3964  
21  
22 Aldo L. Miranda-Collazo, DMD  
23 Hyde Park  
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

37 ~~Linda G. Trotter, DMD, FAGD~~  
38 ~~4247 Stacey Road E~~  
39 ~~Jacksonville, FL 32250-2100~~  
40  
41 *Student Delegates*  
42 Ms. Hannah W. Benn  
43 3 Sherman Avenue  
44 Summit, NJ 07901-1926  
45  
46 Mr. Kevin S. Lin  
47 4722 S. Balveine Place  
48 Salt Lake City, UT 84107-1474  
49  
50 Student Alternates  
51 Ms. Diana Huynh  
52 3316 40<sup>th</sup> Street  
53 Metairie, LA 70001  
54  
55 Mr. Trent E. Finley  
56 4702 N. Flintridge Road  
57 Kansas City, MO 64150-1154  
58  
59

