

Minutes of the 48th Annual Session of the California Dental Association (CDA) House of Delegates

Sacramento Hyatt Regency
November 17-19, 2017

First Session – November 17, 2017

1. **Call to Order:** Speaker of the House Dr. Craig Yarborough called the first session of the House of Delegates (house) to order on November 17 at 8:00 a.m. The Sacramento Police Department presented the colors of our flags, and Mahelet Negash, delegate from Loma Linda University led the house in reciting the Pledge of Allegiance.
2. **Establishment of Quorum:** Secretary Dr. Richard Nagy established that a quorum was present.
3. **Introduction of New Resolutions:** The speaker introduced the following new resolutions submitted for consideration by the house through reference committee. The details of these actions are noted within the reference committee report.
 - Resolution 10: Emergency General Operating Guidelines
 - Resolution 11: Dental Office Staffing
 - Resolution 12: Role of Dentistry in Treatment of Sleep-Related Breathing Disorders
 - Resolution 13: Dental Insurance Relations Task Force
 - Resolution 14: Later School Start Times
 - Resolution 15: Reinstate *CDA Presents* in Anaheim for Peer Review Training and Develop Virtual Training and E-Learning Courses for Component Volunteers

The speaker ruled the following resolutions out of order upon submission:

- House Operational Schedule submitted by the Santa Clara County Dental Society. The decision of the speaker was appealed. The speaker's ruling was sustained by a vote of 122 (65%) in favor to 65 (35%) opposed.
 - Closed Session Attorney/Client Privilege Information submitted by the Santa Clara County Dental Society. The decision of the speaker was appealed. The speaker's ruling was sustained by a vote of 121 (63%) in favor to 70 (37%) opposed.
 - Open Debate at House Meetings submitted by the Santa Clara County Dental Society. The decision of the speaker was appealed. The speaker's ruling was sustained by a vote of 145 (75%) in favor to 49 (25%) opposed.
4. **Approval of the Agenda:** The agenda was approved as the official order of business for the 2017 annual session of the house.
 5. **Strategic Plan Review including Trends and Issues Presentations:** The house received presentations as follows:
 - President-Elect Dr. Natasha Lee facilitated an overview of the strategic plan along with trustees Drs. Gail Duffala, Nava Fathi, Kenneth Harrison and Scott Kim.
 - Dr. David Gesko, dental director and senior vice president for HealthPartners presented an overview of HealthPartners' integrated health care model.

- Dr. Jayanth Kumar, California state dental director presented on the partnership between CDA and the state oral health plan to reduce barriers to dental care.
 - Dr. John Blake, chair of the government affairs council presented on CDA's Access Plan initiatives aimed at improving oral health.
 - Anders Bjork, vice president of market insights and member engagement, presented on key trends in dentistry, which are directing CDA's decision-making.
6. **Dues Category Update:** Dr. Hema Patel, chair of the council on membership presented an update on the simplification of the dues structure.
 7. **ADA President Address:** ADA President Dr. Joseph Crowley addressed the house.
 8. **Adjournment of the First Session of the House:** The speaker declared the first session of the house adjourned at 2:25 p.m.

Second Session – November 17, 2017

1. **Call to Order:** The speaker called the second session of the house to order on November 17 at 4:30 p.m.
2. **Establishment of Quorum:** The secretary established that a quorum was present.
3. **TDSC Update:** Dr. James Stephens, chair of the TDSC board of directors presented on the activities of TDSC and launch of the TDSC marketplace.
4. **Adjournment of the Second Session of the House:** The speaker declared the second session of the house adjourned at 5:44 p.m.

Third Session – November 18, 2017

1. **Call to Order:** The speaker called the third session of the house to order on November 18 at 1:00 p.m.
2. **Establishment of Quorum:** The secretary established that a quorum was present.
3. **Closed Session – Legal Matters:** Alison Sandman, chief legal officer provided an update on legal matters in closed session.
4. **Presidential Address:** President Dr. Clelan Ehrler addressed the house reflecting on his year as president.
5. **Organizational Highlights:** Peter DuBois, CDA executive director provided the house with an update on key organizational activities in 2017.
6. **Financial Highlights:** Treasurer Dr. Kevin Keating presented on the 2017 financial highlights and 2018 budget.
7. **Resolution Deliberation:**
 - a. **Reference Committee Report**

Prioritized resolutions: In consultation with the speaker, Dr. Nicholas Marongiu, reference committee chair prioritized Resolution 13RC-2017-H, moved to substitute for Resolutions 11-2017-H and 13-2017-H. The details of these actions are noted below.

13. Dental Insurance Relations Task Force: Resolution 13RC-2017-H was defeated by a vote of 138 (68%) opposed to 65 (32%) in favor. Then, Resolution 13SI-2017-H was substituted for Resolution 13-2017-H as submitted by the San Fernando Valley Dental Society, and was adopted by a vote of 190 (98%) in favor to 3 (2%) opposed as follows:

Resolved, that a task force be created to address dental insurance and practice economic issues and make recommendations on how CDA can address and assist members in responding to changes in dental insurance coverage and practice economics, and be it further

Resolved, that the task force place specific priority on researching dental payment denials and delays, and urge the board of trustees to intervene and take appropriate action if necessary, and be it further

Resolved, that the task force provide a preliminary report to the 2018 House of Delegates, with a final report to the 2019 House of Delegates.

11. Dental Office Staffing: Resolution 11-2017-H submitted by San Francisco Dental Society, Marin County Dental Society, Orange County Dental Society, Harbor Dental Society and Southern Alameda County Dental Society was adopted by a vote of 179 (90%) in favor to 20 (10%) opposed as follows:

Resolved, that the appropriate CDA entity study and develop actionable statewide solutions in response to the dental office staffing shortage, and be it further

Resolved, that findings with recommendations be made to the 2018 House of Delegates.

Consent Agenda: The reference committee chair presented the reference committee consent agenda, which included action on the following resolutions: 1-2017-H, 2-2017-H, 3-2017-H, 6-2017-H, 7-2017-H, 8-2017-H, 10-2017-H, 14-2017-H and 15-2017-H. The house pulled resolutions 7-2017-H, 10-2017-H, 14-2017-H and 15-2017-H. Resolution 16-2017-H was adopted with the remaining resolutions as follows:

16. Consent Agenda: Resolved, that the reference committee 1 consent agenda be approved.

Remaining Business: The reference committee chair presented the reference committee recommendations on the remaining resolutions.

Actions taken: All non-prioritized resolutions are recorded in numerical order below for ease of reference, noting those adopted on consent. Resolutions 7-2017-H, 10-2017-H, 12-2017-H, 14-2017-H and 15-2017-H were considered during the fourth session of the house as continuation of unfinished business.

1. Membership Category Simplification: Resolution 1-2017-H, as submitted by the board was adopted on the consent agenda as follows:

Resolved, that the CDA Bylaws be amended as attached, and be it further

Resolved, that these changes take effect upon adjournment sine die of the House of Delegates.

[The amendments to the CDA Bylaws is attached \[Attachment A\]](#)

2. Qualifications for Participation in Peer Review: Resolution 2-2017-H, as submitted by the board was adopted on the consent agenda as follows:

Resolved, that the peer review manual be amended as attached.

[The amendments to the peer review manual is attached \[Attachment B\]](#)

3. Peer Review Request for Records Non-Compliance: Resolution 3-20017-H, as submitted by the board was adopted on the consent agenda as follows:

Resolved, that the peer review manual be amended as attached.

[The amendments to the peer review manual is attached \[Attachment C\]](#)

6. Nominations to Fill CDA Holding Company, Inc. Board of Directors Positions: Resolution 6-2017-H, as submitted by the board was adopted on the consent agenda as follows:

Resolved, that Brenda Buzby, DDS be selected as the trustee member of the CDA Holding Company, Inc. board of directors.

7. Strategic Plan: The house removed this item from the consent agenda. Resolution 7RC-2017-H was substituted for Resolution 7-2017-H, as submitted by the board and was adopted by card vote as follows:

Resolved, that the revised CDA mission statement and strategic plan be approved as amended and attached.

[The revised CDA strategic plan is attached \[Attachment D\]](#)

8. Code of Ethics Advisory Opinion Revisions: Resolution 8-2017-H, as submitted by the board was adopted on the consent agenda as follows:

Resolved, that the CDA Code of Ethics be amended as attached, and be it further

Resolved, that future advisory opinions of the CDA Code of Ethics be approved by the board of trustees.

[The amendments to the CDA Code of Ethics is attached \[Attachment E\]](#)

9. Restoration of the Policy Development Council: Resolution 9S1-2017-H was substituted for Resolution 9-2017-H, as submitted by Dr. John Pisacane, delegate and was defeated by a vote of 124 (63%) opposed to 73 (37%) in favor as follows:

~~Resolved, that the CDA Bylaws be amended as attached, and be it further~~

~~Resolved, that these changes take effect upon adjournment sine die of the House of Delegates.~~

10. Emergency General Operating Guidelines: The house removed this item from the

consent agenda. Resolution 10RC-2017-H, was substituted for Resolution 10-2017-H, as submitted by the board, amended within the general operating principles (to ensure efforts for determining if a continued meeting should be scheduled if house proceedings are cancelled or interrupted due to an emergency or extenuating circumstance) and adopted by card vote as follows:

Resolved, that the emergency procedures be established for meetings of the House of Delegates and that this policy be reflected in the general operating principles as amended and attached.

[The amendments to the general operating principles is attached \[Attachment F\]](#)

12. Role of Dentistry in Treatment of Sleep-Related Breathing Disorders: Resolution 12RC-2017-H was substituted for Resolution 12-2017-H, as submitted by the San Fernando Valley Dental Society and was defeated by a vote of 113 (61%) opposed to 73 (39%) in favor as follows:

~~Resolved, that the CDA policy on sleep related breathing disorders (Resolution 25RC-2011-H) be amended to include more detail about the role of the dentist in the screening and treatment of sleep related breathing disorders as attached.~~

14. Later School Start Times: The house removed this item from the consent agenda. Resolution 14-2017-H, submitted by Dr. Michael Simmons delegate was defeated by a vote of 130 (70%) opposed to 55 (30%) in favor as follows:

~~Resolved, that CDA endorse adolescent sleep health by supporting school start times for California middle and high school students to begin no earlier than 8:30 a.m.~~

15. Reinstate CDA Presents in Anaheim for Peer Review Training and Develop Virtual Training and E-Learning Courses for Component Volunteers: The house removed this item from the consent agenda. Resolution 15S1-2017-H was substituted for Resolution 15-2017-H, as submitted by Harbor Dental Society and Orange County Dental Society, and was adopted with a friendly editorial amendment to include "appropriate CDA entity" in the resolving clause by card vote as follows:

Resolved, that the appropriate CDA entity report back to the House of Delegates in 2018 on the progress of the development of virtual training and e-learning courses for peer review, ethics and well-being, and be it further

Resolved, that the CDA host face-to-face workshops for peer review, ethics and well-being in addition to virtual training opportunities.

- b. **New Business**: The speaker accepted Resolution 17-2017-H as new business and announced it during the third session. The house considered the resolution during the fourth session of the house as continuation of unfinished business, but is noted below for ease of reference.

17. Clarification of Duty of Loyalty: Resolution 17-2017-H, as submitted by the Santa Clara County Dental Society was defeated by a vote of 124 (78%) opposed to 36 (23%) in favor as follows:

~~Resolved, that the board of trustees be urged to present the evidence supporting both sides of issues presented to the House of Delegates for deliberation, including a clear statement of all positions considered by the board of trustees, and be it further~~

~~Resolved, that CDA trustees be provided additional training on these concepts.~~

8. **ADA Updates:** Dr. Lindsey Robinson, thirteenth district trustee to the ADA presented a report on ADA activities and announced her candidacy to run for ADA president-elect in 2018 during the fourth session of the house as continuation of unfinished business and noted here for ease of reference.
9. **Distinctive Updates:** The speaker introduced the following distinctive updates:
 - a. **Legislative Update:** Dr. Jim Wood, California State Assemblyman provided the house with a legislative update.
 - b. **CDA Foundation Report:** Dr. Ronald Mead, chair of the CDA Foundation board of directors presented the following awards for 2017:
 - Dr. Arthur A. Dugoni faculty award presented to Dr. Richard Fredekind
 - Humanitarian award presented to Dr. Lester Low
 - Student loan repayment grant award presented to Dr. Daniel Ramirez
10. **Adjournment of the Third Session of the House:** The speaker declared the third session of the house adjourned at 5:20 p.m.

Fourth Session – November 19, 2017

1. **Call to Order:** President Dr. Clelan Ehrler announced that the speaker, Dr. Craig Yarborough was unable to proceed with the house, and Speaker Emeritus Dr. Alan Felsenfeld had been appointed to be speaker pro tem through the remainder of the house. Upon this announcement, the speaker pro tem called the fourth session of the house to order on November 19 at 8:00 a.m.
2. **Establishment of Quorum:** The secretary established that a quorum was present.
3. **CDA Officer Elections:** During the first session of the house, the speaker declared the CDA officer nominations (Resolution 4-2017-H, as submitted by the board) elected by acclamation, as no one had contested the nominations in accordance with the general operating principles. This item was noted as:

President-Elect.....	Dr. R. Del Brunner
Vice President.....	Dr. Richard Nagy
Secretary	Dr. Judee Tippett-Whyte
Treasurer	Dr. Steven Kend
4. **Thirteen District Trustee Election:** The speaker declared Dr. James Stephens nominee for the thirteenth district trustee for the 2018 ADA election (Resolution 5-2017-H, as submitted by the board) elected by acclamation during the first session of the house, as he ran uncontested.
5. **Installation of Officers and Trustees:** The speaker pro tem introduced Dr. Arthur Dugoni, CDA past president, serving as installing officer to begin the installation of the 2018 officers and trustees.
 - a. **Installing Officer:** Dr. Dugoni installed all officers and trustees effective January 1, 2018.
 - b. **President-Elect Component Presentation:** San Francisco Dental Society made a presentation in honor of Dr. Natasha Lee.
 - c. **President-Elect Address:** Dr. Lee addressed the house as the newly installed president.

6. **Continuation of Unfinished Business:** Unfinished business from the third session included Resolutions 7-2017-H, 10-2017-H, 12-2017-H, 14-2017-H and 15-2017-H as noted above. Additionally, the house received distinctive updates as follows:
 - a. Leadership Development Committee: Dr. Karin Irani, chair of the leadership development committee presented an update on the timing of the ADA delegation application during the fourth session of the house as continuation of unfinished business.
 - b. ADA Political Action Committee (ADPAC): Dr. Gary Ackerman, ADPAC 13th district representative provided an update on national political events and the role of ADPAC during the fourth session of the house as continuation of unfinished business.
7. **Adjournment of the House of Delegates:** There being no further business, the speaker pro tem declared the house adjourned sine die at 11:03 a.m.

On file

Signature of Speaker

Date Signed

Date Approved

On file

Signature of Secretary

Date Signed

Date Approved

CDA Bylaws (Amendments adopted per Resolution 1-2017-H)

Note: sections in blue double underlined are additions; sections in red strikethrough are deletions

CHAPTER II – MEMBERSHIP

The board shall establish rules governing membership not covered by these bylaws. An individual may only be a member of this association in one of the following categories: ~~Active, Retired, Life, Student, Affiliate, Sponsored, Allied Dental Health Professional, Honorary, Provisional, or Associate dentist, student or general member.~~ As used in these bylaws: (i) the term "equivalent degree" shall mean a degree that meets the educational requirements for licensure as a dentist in a state or other jurisdiction of the United States; and (ii) the term "other jurisdiction of the United States" shall mean the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Mariana Islands and the territories of the United States Virgin Islands, Guam and American Samoa.

Section 10. **MEMBERS IN GOOD STANDING:** Members who are in good standing with their component and whose dues for the current year, when applicable, have been paid, shall be in good standing with this association.

Section 20. **ACTIVE DENTIST MEMBER:**

A. Classification: ~~A dentist~~An individual shall be classified as an ~~active dentist~~ member of this association who subscribes to, adheres to and is bound by the codes of ethics and Constitution and Bylaws of the ADA and this association, and who:

1. Has been accepted for membership in a component of this association; and
- 2a. ~~Is licensed or holds a special permit to practice dentistry in California; or~~ Holds a DDS, DMD or equivalent degree.
- 2b. ~~Engages in activities in federal government service.~~

B. Privileges:

1. An ~~active dentist~~ member shall receive the following benefits of membership: a membership card; access to a ~~reduced~~ subscription ~~rate~~ for the *Journal of the California Dental Association*; attendance at any scientific session of this association; access to CDA-endorsed insurance plans; and such other services as are provided by the association.
2. An ~~active dentist~~ member shall be eligible for election as a delegate or alternate delegate to the house of this association and the ADA and for election or appointment to any office or agency of this association, except as otherwise provided in these bylaws.
3. An ~~active dentist~~ member under a disciplinary sentence of suspension shall not be privileged to hold office, either elective or appointive, including delegate and alternate delegate, in such member's component society and this association, or to vote or otherwise participate in the selection of officials of such member's component and this association.
4. A dentist member shall receive benefits of membership from the ADA, CDA and their component.

~~Section 30. RETIRED MEMBER:~~

~~A. **Classification:** An active member who has been granted retired membership status by a component society, or having met the ADA criteria for retired membership, and who no longer earns income from the performance of service as a member of the faculty of a dental school, or as a dental administrator or consultant, or as a practitioner of any activity for which a license to practice dentistry or dental hygiene is required by the State, or is on permanent disability, may be classified as a retired member upon application to the executive director and proof of qualification. To qualify for retired membership status, the active or previously retired member shall submit an affidavit attesting to the member's retirement through the component society and said component shall submit certificates verifying such retirement.~~

~~Maintenance of retired membership in good standing in the member's component society or having met the ADA criteria for retired membership shall be a requisite for entitlement to and continuance of retired membership in this association. An active California dental license is not required to retain retired membership status. A retired dentist providing dental services on a pro-bono basis or for a level of remuneration consistent with that defined in Section 1716.1 of the Dental Practice Act, may remain on retired status and shall be eligible for appropriate CDA-endorsed products as long as the dentist retains an active dental license.~~

~~B. **Privileges:** A retired member shall receive a membership card and shall be entitled to all the privileges of an active member.~~

~~Section 40. **LIFE MEMBER:**~~

~~A. **Classification:** A member who has been an active or retired member for 30 consecutive years or a total of 35 years of active or retired membership, having attained the age of 65 years, or a member in good standing who has been an active and/or retired member in good standing in another constituent society of the ADA, having met the ADA criteria for life membership; shall be automatically notified as to eligibility as a life member. Life membership shall be effective the calendar year following the year in which the requirements are fulfilled.~~

~~B. **Privileges:** In addition to the privileges of active membership noted above, a life member, either retired or active, shall be exempt from dues and receive a certificate of life membership.~~

~~Section 30. **STUDENT MEMBER:**~~

~~A. **Classification:** A dental student shall be classified as a student member of this association who:~~

- ~~1. **Predoctoral:** A student eligible for student membership in the ADA may be classified as a student member of this association. A student is enrolled in a program approved by the Dental Board of California may also be classified as a student member of this association. or~~
- ~~2. **Postdoctoral:** Dentists may be classified as postdoctoral students provided they are is engaged full-time in

 - (a) an advanced training course of not less than one academic year's duration in an accredited school or
 - (b) an internship or residency program accredited by the Commission on Dental Accreditation.~~

B. Privileges:

1. A student member shall receive the following benefits of membership: a membership card; the *Journal of the California Dental Association*, the subscription price of which shall be included in the annual dues; attendance at any scientific session of this association; access to CDA-endorsed insurance plans; and such other services as provided by the board.
2. Unless otherwise specifically provided, a reference in these bylaws to "dentist members" shall not include student members.
3. A student members shall be considered a members of this association for the purpose of determining eligibility for appointment to committees, election to councils, and election to the CDA house as provided in these bylaws.
4. A student member shall receive benefits of membership from the ADA, CDA and their dental school component.

Section ~~6~~ 40. **AFFILIATE GENERAL MEMBER:**

A. ~~Classification: A dentist who maintains membership in the ADA and who is not otherwise eligible for membership in this association may be classified as an affiliate member of this association.~~ An individual shall be classified as a general member of this association who subscribes to, adheres to and is bound by the codes of ethics and Constitution and Bylaws of the ADA and this association, and who:

1. Is ineligible for any other classification of membership and is practicing dentistry or is employed in a dental related field in a country other than the United States; or

~~B. Privileges: An affiliate member shall receive the following benefits of membership: a membership card; the *Journal of the California Dental Association*, the subscription price of which shall be included in the annual dues; attendance at any scientific session of this association; access to CDA-endorsed insurance plans; and other services as are authorized by the board. Affiliate members are not eligible for election by this association as a delegate or alternate delegate to the house of the ADA or to the house of this association, nor shall they be eligible for election or appointment to any office of this association. Unless otherwise specifically provided, a reference in these bylaws to "members" shall not include affiliate members.~~

~~Section 70.~~ **SPONSORED MEMBER:**

~~A. Classification: An individual who functions within a dental office, is professionally associated with a CDA member, is not a dentist, and whose membership is sponsored by a CDA active, life, retired, or affiliate member may be classified as a sponsored member of this association. Additionally, component dental society staff, upon application, may also be classified as sponsored members.~~

~~B. Privileges: A sponsored member shall receive the following benefits of membership: access to CDA-endorsed insurance plans, and other services as are authorized by the board. A sponsored member shall be exempt from all dues. Sponsored members are not eligible for election by this association as a delegate or alternate delegate to the house of the ADA or to the house of this association, nor shall they be eligible for election or appointment to any office of this association. However, component society executive directors are eligible to serve in appointive positions. Unless otherwise specifically provided, a reference in these bylaws to "members" shall not include sponsored members.~~

~~Section 80. ALLIED DENTAL HEALTH PROFESSIONAL (ADHP) MEMBER:~~

~~A.2. Classification: An individual who is a dental hygienist, dental assistant, dental laboratory technician, or dental administrative staff person, who has not met the educational requirements for licensure as a dentist anywhere in any state or other jurisdiction of the United States, and who subscribes to, adheres to, and is bound by the ethics of this association, may be classified as an ADHP member of this association.; or~~

~~3. Has made outstanding contributions to the advancement of the art and science of dentistry, upon nomination by the board and election of the house, shall be classified as a general member.~~

~~B. Privileges: General members shall receive the following benefits of membership: a membership card; access to a subscription for the *Journal of the California Dental Association*, attendance at any scientific session of this association; access to CDA-endorsed insurance plans; and other services as are authorized by the board. General members are not eligible for election by this association as a delegate or alternate delegate to the house of the ADA or to the house of this association, nor shall they be eligible for election or appointment to any office of this association. General members are eligible to serve in appointive positions.~~

~~B. Privileges: An ADHP member shall receive the following benefits of membership: a membership card; a reduced subscription rate for the *Journal of the California Dental Association* and free subscription for the *Update*; attendance at any scientific session of this association; access to CDA-endorsed insurance plans; and other services as authorized by the board. ADHP members are not eligible for election by this association as a delegate or alternate delegate to the house of the ADA or to the house of this association, nor shall they be eligible for election or appointment to any office of this association. Unless otherwise specifically provided, a reference in these bylaws to "members" shall not include ADHP members.~~

~~Section 90. HONORARY MEMBER:~~

~~A. Classification: An individual who has made outstanding contributions to the advancement of the art and science of dentistry, upon nomination by the board and election of the house, shall be classified as an honorary member of this association.~~

~~B. Privileges: An honorary member shall receive a membership card and the *Journal of the California Dental Association* at no cost. An honorary member shall be entitled to attend any scientific session of this association and such other services as are authorized by the board. Honorary members are exempt from all dues. Honorary membership is without rights or obligations.~~

~~Section 100. PROVISIONAL MEMBER:~~

~~A. Classification: A dentist who has recently graduated from a dental school, graduate program, residency program accredited by the Commission on Dental Accreditation, or from a program approved by the Dental Board of California or has recently separated from the military, and is not otherwise eligible for active membership may be classified as a provisional member of this association. No later than 18 months following graduation or separation from the military or immediately upon meeting the qualifications for active membership, a provisional member must apply for a change in membership status.~~

~~B. Privileges: A provisional member shall receive the following benefits of membership: a membership card; the *Journal of the California Dental Association*, the subscription price of which shall be provided~~

~~at a reduced rate; attendance at any scientific session of this association; and other services as authorized by the board. A provisional member shall have no right to peer review or an appeal from the denial of active membership in this association.~~

~~Section 110. **ASSOCIATE MEMBER:**~~

~~A. **Classification:** A California dental school faculty member with a dental degree who is not licensed in the state of California shall be an associate member of this association upon application to and approval by the Council on Membership. Additionally, a person, not eligible for any other type of membership in this association, who significantly contributes to the advancement of the objectives of this association, upon application to and approval by the Council on Membership, shall be an associate member of this association.~~

~~B. **Privileges:** An associate member shall receive the following benefits of membership: a membership card; the *Journal of the California Dental Association*, the subscription price of which shall be included in the annual dues; attendance at any scientific session of this association; and other services as are authorized by the board.~~

~~Associate members are not eligible for election by this association as a delegate or alternate delegate to the house of the ADA or to the house of this association, nor shall they be eligible for election or appointment to any office of this association. Unless otherwise specifically provided, a reference in these bylaws to "members" shall not include associate members.~~

CHAPTER III – COMPONENT SOCIETIES

Section 30. MEMBERSHIP:

A. **Membership:** The membership of each component society, except as otherwise provided in these bylaws, shall be limited to individuals within the territorial jurisdiction of such component society, who are also eligible for membership in CDA. An individual must maintain membership in the component within whose jurisdiction the dentist conducts the major part of a practice. A full-time dental educator or dental consultant who is also a practitioner must maintain membership in the component which includes the jurisdiction of the dentist's dental practice. A non-practicing dental educator or dental consultant must maintain membership either in the component which includes the jurisdiction of the dental school or consulting office or place of residence. A current dental educator member will not be required to transfer membership. A member who is employed in Federal Dental Service ~~member~~ must maintain membership either in the component which includes their residence or the dentist's principal place of federal employment. A dentist without a practice address, who applies for membership in the territorial jurisdiction of the component where the dentist resides, shall be approved upon completion of the requirements for membership and shall remain a member of the component where the dentist resides until a permanent practice location is established. If the practice location is established outside the jurisdiction of the component, the member will be required to transfer to the appropriate component based on practice location.

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CHAPTER IV – HOUSE OF DELEGATES

Section 50. POWERS: The house shall have the following powers without limitation:

F. To elect ~~honorary general~~ members pursuant to Chapter II Section 40A.

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CHAPTER V – BOARD OF TRUSTEES

Section 20. **QUALIFICATIONS:** A trustee must be a [dentist](#) member in good standing of this association and of the component society from which the dentist was elected.

Section 80. **DUTIES:** It shall be the duty of the board:

- G. To nominate candidates for ~~honorary~~[general](#) membership [pursuant to Chapter II Section 40A](#) for election by the house.

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CHAPTER VI – ELECTED OFFICERS

Section 20. **ELIGIBILITY:** Only a [dentist](#) member in good standing shall be eligible to serve as an elected officer.

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Peer Review Manual, General Information (Amendments adopted per Resolution 2-2017-H)

Note: sections in blue double underlined are additions

(Minimum of three) to conduct the entire review, i.e., review case material, conduct a clinical exam (if appropriate), interview the dentist (if appropriate), deliberate their findings and ultimately draft the resolution letter and addendum.

Appointing the Component and Specialty Peer Review Committee

The following conditions are essential and should be met when appointing a component general and specialty peer review committee.

1. All committee members, both general and specialty committees **must** be CDA members, attend CDA training workshops as required by the council, and are actively practicing dentistry, or in possession of an active California dental license.
2. The number of members serving on review committees should reflect the caseload and geographical considerations faced by the committee. The committee or subcommittee must consist of an uneven number of dentists (minimum of three).
3. Members of the committee should serve staggered terms of three to five years to insure continuity of experience. Members of the committee that continue actively practicing dentistry, or are in possession of an active California dental license may be reappointed.
4. Members of the committee shall be selected for their ability to maintain objectivity, discretion, and understanding, and should be comprised of practitioners held in high esteem by their peers.
5. General Committees: Members of the general committees shall be general practitioners. If reviewing services provided by a dentist in an ADA recognized specialty area, the general committee (minimum of three) must use a specialty dentist consultant (minimum of one) who limits his or her practice to the same ADA recognized specialty area as the dentist under review. If reviewing services provided by a dentist in an area of dentistry not recognized as an ADA specialty, the general committee must use a minimum of one consultant who is a general dentist with knowledge of the procedures under review and/or a dentist who limits his or her practice to an ADA recognized specialty which requires knowledge of the procedures under review. When using a consultant, the committee must still consist of an uneven number of dentists: either three general practitioners and two consultants, or four general practitioners and one consultant. The committee cannot consist of two general practitioners and one consultant.
6. Specialty Committees: The members of specialty committees must be dentists practicing in the same ADA recognized specialty area as the dentist under review, and the committee must consist of an uneven number of dentists (minimum of three).
7. Each general and specialty peer review committee member must have practiced for a minimum of five years. (Specialists must have practiced in their specialty areas for a minimum of five years.) Since experience is essential for review committees, if one member has only five years experience in practice, another member should have experience exceeding five years.
8. The peer review committee should reflect the quality of dentistry provided in the component area as set forth by the CDA Quality Evaluation Manual.
9. As volunteers, members of component and specialty review committees shall not be paid for their services. Any dentist volunteering to conduct an examination on behalf of a review committee, because of a particular treatment modality, shall not receive a fee.
10. It is recommended that a committee chair serve a minimum three-year term as a committee member and a minimum three-year term as a chair for continuity.
11. All general and specialty peer review committee members, as well as CDA peer review staff, are expected to fulfill the Council on Peer Review training requirements in order to participate in the peer review system.
12. Component and specialty chairs and committee members are required to participate in an initial and biennial peer review training conducted by the Council on Peer Review.

Legal Protection of and Constraints upon Peer Review Committees and Peer Review Records

A component dental society peer review committee or specialty committee **may not** implement changes in the peer review system prior to approval from the Council on Peer Review and/or CDA Board of Trustees. To do so may jeopardize the legal position of the peer review committee and its members.

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Peer Review Manual, Responsibilities of the Peer Review Staff (Amendments adopted per Resolution 3-2017-H)

Note: sections in blue double underlined are additions; sections in red strikethrough are deletions

- d. If the dentist responds within the specified time, but cannot produce the records as requested for circumstances beyond his or her control, the case must be referred to the Council on Peer Review for direction.
 - e. If the dentist fails to comply within the specific time, staff must contact the dentist by telephone to confirm that the dentist has received the request for records.
 - f. If the dentist fails to respond within the specified time, send the Council on Peer Review a copy of the case file for direction on how to proceed with the case.
 - g. CDA will send the Dentist Non-Compliance with Records (Form #91) giving the dentist fourteen (14) calendar days to comply with the request for records. If the dentist fails to respond within the specified time, the Council on Peer Review ~~will~~ may refer the dentist to the Judicial Council with Dentist Referral to Judicial Council (Form #93) and the case will be closed. Patient must be notified of the referral with the Notification to Patient of Dentist Referral to Judicial Council (Form #88A).
 - h. If the dentist complies within the specified time, proceed with the review.
3. **Contact Any Carrier Involved:** If a **carrier** is mentioned in the request for review, **whether or not** the request pertains to benefits, send the following forms:
 - Carrier Notification Letter (Form #17).
 - Copy of signed Authorization for Use and Disclosure of Health Information (Form #5).
 - If the carrier does not respond within the fourteen (14) calendar days, re-send the Carrier Notification Letter (Form #17) and a copy of the signed Authorization for Use and Disclosure of Health Information (Form #5) indicating "Second Request".
 4. **Carrier Does Not Cooperate with Peer Review:** If after **two written** requests for information a carrier does not cooperate with the request for information, these steps must be followed:
 - a. If the case **can be reviewed** without input from the carrier, continue with the review.
 - b. If the case **cannot be reviewed** without input from the carrier, send a copy of the case file and a Non-Routine Case Memo (Form #39) to the Council on Peer Review. Suspend the peer review until direction is received from the Council on Peer Review.
 - c. In cases involving a refund in which the carrier failed to provide the committee with requested information and/or confirm their willingness to reestablish patient's eligibility without affecting patient's current yearly benefit, the refund will go to the patient even if they are still covered by that carrier. In this instance, the carrier will no longer be considered a part of the peer review case and WILL NOT be copied on the final letter of resolution.
 5. **Consulting or Subsequent Treating Dentist:** Send the following forms to **all** dentists mentioned as consultants or subsequent treating dentists:
 - Consulting/Subsequent Dentist Notification Letter (Form #18).
 - Copy of Signed Authorization for Use and Disclosure of Health Information (Form #5).
 - Consulting/Subsequent Dentist Reply Form (Form #19).
 6. **Consulting or Subsequent Treating Dentist's Failure to Respond:** If a consulting or subsequent treating member dentist fails to comply with the request for radiographs, records, etc. and the requested information is necessary for completion of review, the following procedures must be followed:
 - a. Send the consulting/subsequent treating dentist, **by certified mail, return receipt requested**, Dentist Non-Compliance During Review Letter (Form #51)

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CDA Strategic Plan (Adopted per Resolution 7RC-2017-H)

Mission: CDA is committed to the success of our members in service to their patients and the public

Membership Goal: Robust membership comprised of members who are loyal to and engaged with CDA

Objective 1: Develop recruitment programs that result in at least 1% annual membership growth with the goal of reaching a California market share of 75% by 2020

- 1.1 Develop a membership structure that meets the needs of students, present and future dentists, is sustainable and administratively sound
- 1.2 Refine, develop and implement recruitment programs utilizing evidence-based data

Objective 2: Ensure member programs and services improve retention, loyalty metrics and optimize the member experience

- 2.1 Implement the TDIC/TDIC Insurance Solutions, TDSC and CDA Presents business plans, market and promote key member programs
- 2.2 Promote key member benefits with focus on students and new dentists
- 2.3 Develop and implement a comprehensive communications plan that promotes a positive image of the profession and improves membership value
- 2.4 Identify opportunities to partner with component dental societies to strengthen the member experience and maximize member value at all levels of the tripartite

Community and Advocacy Goal: Recognized by the profession and the public as the leading advocate for dentistry and the oral health of Californians

Objective 3: Improve the oral health of the public and the practice interests of our members through advocacy and programs

- 3.1 Advocate for programs and services that improve access to oral health and eliminate barriers to care including implementation of the CDA Access Plan and collaboration with the state dental director
- 3.2 Promote the importance of oral health and dentistry's role in the changing health care environment
- 3.3 Seek solutions to members' concerns and patient care with private and government-sponsored benefit plans
- 3.4 Support CDA Foundation programs that provide dental care to underserved communities including CDA Cares and the Student Loan Repayment Grant

Organizational Goal: Optimal organizational leadership and infrastructure to meet member needs

Objective 4: Ensure CDA volunteer leaders have the knowledge and skills that enable achievement of organizational goals

- 4.1 Develop and implement a customized training program that delivers education based on volunteer leaders unique needs
- 4.2 Refine volunteer pipeline development and selection processes based on a volunteer placement needs assessment
- 4.3 Provide sufficient, meaningful and inclusive volunteer opportunities

Objective 5: Improve the organizational infrastructure to support business operations

- 5.1 Develop and implement a technology plan that supports the current and future business needs of the organization

- 5.2 Develop an enterprise risk management strategy to continually evaluate risks facing the organization
- 5.3 Address long-term space and location requirements to support CDA's future growth

Finance Goal: Financial structure and forecasting that ensures organizational sustainability

Objective 6: Increase non-dues revenue and reduce expenses to ensure net income offsets average yearly reserve spending

- 6.1 Enhance current and evaluate new sources of non-dues revenue
- 6.2 Increase member awareness and utilization of existing revenue generating products and services
- 6.3 Offer revenue generating products and services to new markets
- 6.4 Reduce expenses in the delivery of programs and services

Objective 7: Target reserves at 85% of total CDA operating expense and not fall below 70%

- 7.1 Create an annual operating budget with surplus net income to fund annual reserve spending
- 7.2 Ensure prudent annual reserve spending

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CDA Code of Ethics (Amendments adopted per Resolution 8-2017-H)

Note: sections in blue double underlined are additions; sections in red strikethrough are deletions

Advisory Opinion:

11.A.1. *Split Fees in Advertising and Marketing Services: The prohibition against a dentist's accepting or tendering rebates or split fees applies to business dealings between dentists and any third party, not just other dentists. ~~Thus, a dentist who pays for advertising or marketing services by sharing a specified portion of the professional fees collected from prospective or actual patients with the vendor providing the advertising or marketing services is engaged in fee splitting. The prohibition against fee splitting is also applicable to the marketing of dental treatments or procedures via "social coupons" if the business arrangement between the dentist and the concern providing the marketing services for that treatment or those procedures allows the issuing company to collect the fee from the prospective patient, retain a defined percentage or portion of the revenue collected as payment for the coupon marketing service provided to the dentist and remit to the dentist the remainder of the amount collected. The prohibition against fee splitting is not applicable to marketing via group advertising or referral services that do not base their fees on the number of referrals or amount of professional fees paid by the patient to the dentist. However, the prohibition is not applicable to the marketing of dental treatments or procedures via "social coupons" if:~~*

a. The third-party advertiser does not recommend, endorse or select the healthcare provider; and

b. The fee paid to the third-party advertiser is commensurate with the advertising service provided.

In addition, the prohibition against fee splitting is not applicable to marketing via group advertising or referral services that do not base their fees on the number of referrals or amount of professional fees paid by the patient to the dentist.

1. A third party is any party to a dental prepayment contract that may collect premiums, assume financial risks, pay claims, and/or provide administrative services.

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General Operating Principles (Amendments adopted per Resolution 10RC-2017-H)

Note: sections in blue double underlined are additions

XI. HOUSE OF DELEGATES

H. Emergency Operating Guidelines: In the case of an emergency or extenuating circumstance that affects the house proceedings, (e.g., severe weather, state of emergency, or death), a decision to interrupt or cancel the house proceedings may be necessary. If there is time to gather and present information prior to the house making a decision, CDA will provide as much information as is available regarding:

- o general financial implications to CDA and the components
- o logistical implications to CDA, components and delegates, and
- o determination of how and when any incomplete business of the house will be conducted.

Every effort will be made to provide complete information to the house regarding financial and logistical implications; however, based on the timing of the emergency or extenuating circumstance, some information may be incomplete prior to the house being asked to make a decision.

Options will include calling for a continued House of Delegates. A motion for a continued house may exclude the date, time and location in an emergency situation, and such meeting will allow the inclusion of new business. A special house, in accordance with the AIP, precludes the acceptance of new business.

If house proceedings are cancelled, the House of Delegates will be responsible for determining if a continued meeting should be scheduled.

If the emergency is such that there is no time or it is infeasible to put the decision to the house, the board of trustees or the executive committee, if the board is unavailable, will have the authority to interrupt or cancel house proceedings. In this instance, the board of trustees or the executive committee if the board is unavailable will be responsible for determining if a continued meeting should be scheduled. A full report to the house will be sent containing the decision and information used to make this decision.

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