# Resolution 503 — Protection of State Autonomy

Author: Dr. Spencer Bloom, Delegate

#### **IF YOU VOTE YES**

A YES vote supports the action requested in the resolving clauses. It strengthens the ADA's accountability to the House of Delegates and reaffirms that no policy, compact, or legislative partnership may be advanced as ADA policy without formal approval by the House.

This resolution ensures that constituent societies are respected before national leadership acts, requiring a formal process and a quarterly Governance Transparency Report to keep members informed of referred resolutions, staff actions, and partnerships.

#### **IF YOU VOTE NO**

A NO vote accepts the current pattern where ADA leadership and staff can act without explicit House approval. It allows policies, compacts, or legislative agreements to move forward without member oversight and permits continued public advocacy that may contradict constituent societies.

#### **SUMMARY**

This resolution amends the ADA's policy on Legislative Assistance by the Association (Trans.1977:948; 1986:530; 2019:310). It requires that all legislative partnerships, model policies, compacts, or advocacy activities with outside organizations be formally reviewed and approved by the House of Delegates before promotion or implementation.

It also mandates a quarterly Governance Transparency Report on ADA.org, listing referred resolutions, council and staff actions, advocacy partnerships, and timelines for updates to the House. The resolution preserves the ADA's agility while ensuring member representation and transparency.

#### Why the Board Is Wrong

The Board argues that Resolution 503 would "hamstring" advocacy, but the opposite is true. This resolution does not block engagement, it ensures that engagement follows ADA governance rules.

The House of Delegates alone has authority to set policy. When leadership acts without House approval—such as publicly supporting one version of a licensure compact or partnering with outside insurance groups on Dental Loss Ratio legislation—it violates

established ADA policy and damages trust with state societies.

The resolution simply restores the required checks and communication already promised in Resolution 203H-2024 and existing Legislative Assistance policy. Transparency and consent strengthen, not weaken, advocacy.

#### **TALKING POINTS**

- The House, not staff, sets ADA policy.
- State societies must consent before ADA advocates in their jurisdiction.
- The resolution reinforces the tripartite structure and constituent autonomy.
- It prevents future unapproved partnerships or legislative deals.
- Quarterly transparency reports keep members informed of staff actions.
- Promotes honesty, accountability, and consistency with ADA ethics.
- Protects members from unauthorized political commitments.



Prepared by Dentistry in General Advocacy Coalition

# Resolution 504 — Reinforcing Editorial Integrity and Transparency by Empowering the Council on Communications

Author: Dr. Spencer Bloom, Delegate

#### **IF YOU VOTE YES**

A YES vote supports the action requested in the resolving clauses. It ensures that all ADA-branded publications, news, emails, and social media content reflect adopted House policy and professional ethics.

This resolution gives the Council on Communications the authority to oversee all non-scientific ADA content to ensure accuracy, neutrality, and consistency with member-approved policy. It also establishes a subcommittee of volunteer member dentists to advise on editorial standards and fairness.

#### **IF YOU VOTE NO**

A NO vote supports the status quo where ADA staff and administrative bodies can publish or promote content under the ADA name without structured member oversight. It continues a system where official ADA communications may not always align with House-adopted policy or professional values.

#### **SUMMARY**

Resolution 504 amends the ADA Constitution and Bylaws and the Governance and Organizational Manual to formally vest editorial oversight for all non-scientific ADA communications in the Council on Communications.

It requires that ADA communications—digital, print, and social media—reflect official policy and provide balanced perspectives when addressing controversial or profession-impacting topics. It ensures ADA communications promote professionalism and transparency, protecting against the commoditization of dentistry.

The resolution does not limit speech or scientific discussion. It ensures official ADA channels reflect the voice of the membership, not individual opinions or administrative narratives.

#### Why the Board Is Wrong

The Board claims Resolution 504 would be "cost prohibitive" and slow communications. In reality, oversight and integrity strengthen the ADA's reputation and member trust. A subcommittee model allows efficient review without burdening staff.

The Board's argument overlooks the root issue: repeated instances of ADA publications promoting positions not approved by the House, including editorials endorsing value-based care and DSO-affiliated practice models without balanced counterpoints.

This resolution restores trust by aligning ADA communication with adopted policy. It reinforces transparency, prevents biased editorial influence, and ensures that members—not staff—determine how the ADA's voice represents the profession.

#### **TALKING POINTS**

- ADA communications must reflect House-adopted policy, not staff opinion.
- The Council on Communications is the proper body for editorial oversight.
- Protects professional autonomy and public trust.
- Prevents unapproved promotion of controversial or corporate-affiliated models.
- Creates a member-dentist subcommittee to ensure fairness and balance.
- Encourages transparency and accountability in all ADA-branded communications.
- Strengthens ADA integrity and restores confidence among members.



Prepared by Dentistry in General Advocacy Coalition

# Resolution 506 — Delaying Board of Trustees Members and Speaker of the House Eligibility to Run for Elected Office to Protect Governance Integrity

Author: Dr. Steven Saxe, Delegate

#### **IF YOU VOTE YES**

A YES vote supports the action requested in the resolving clauses. It protects ADA governance integrity by ensuring that sitting Board of Trustees members and the Speaker of the House complete their service before running for higher office.

This resolution introduces a one-year waiting period after a trustee or speaker's term ends before they can seek elective office. The goal is to prevent conflicts of interest, preserve fiduciary focus, and keep Board decisions free from campaign influence or personal ambition.

#### **IF YOU VOTE NO**

A NO vote supports allowing sitting Board members and the Speaker to campaign for ADA President-elect or other offices while still serving. It accepts the risk that campaign activity can influence Board decisions and public trust in the ADA's neutrality.

#### **SUMMARY**

Resolution 506 amends the Election Commission and Campaign Rules and the ADA Governance and Organizational Manual to prohibit any sitting member of the Board of Trustees or the Speaker of the House from running for elective office until one year after completing their term.

This ensures impartial governance, prevents conflicts of interest, and restores confidence that decisions made by the Board are guided by the ADA mission—not campaign strategy. The amendment includes an exception for the Treasurer and Speaker seeking a second consecutive three-year term.

The resolution mirrors ethical standards found in other national professional associations, including the American Medical Association and the American Psychiatric Nurses Association, both of which restrict active officers from campaigning while in office to protect organizational integrity.

#### Why the Board Is Wrong

The Board argues that sitting trustees should not be barred from running for higher office, but that stance prioritizes convenience over integrity. This resolution is not about denying opportunity—it is about maintaining trust.

Campaigning while serving creates an unavoidable conflict of interest. Every Board vote, strategic decision, and public statement risks being influenced by election optics. Requiring a one-year gap restores impartiality and ensures decisions are based solely on what is best for the ADA and its members.

Professional integrity and public confidence depend on eliminating even the perception of political self-interest within governance. The Board's objection ignores that transparency and accountability are the foundation of leadership.

#### **TALKING POINTS**

- Ensures trustees serve with full fiduciary focus and no political distraction.
- Prevents campaign influence on Board decisions and policy direction.
- Aligns ADA governance with national standards set by other associations.
- Builds member trust in the fairness of ADA elections.
- Upholds integrity, transparency, and ethical leadership.
- Protects the profession's reputation by separating governance from campaigning.



Prepared by Dentistry in General Advocacy Coalition

# Resolution 507 — Supporting Plaintiffs in Re: Zelis Repricing Antitrust Litigation Lawsuit to Promote Fair Reimbursement and Transparency in Dental Insurance

Author: Dr. Steven Saxe, Delegate

#### **IF YOU VOTE YES**

A YES vote supports the action requested in the resolving clauses. It directs the ADA to stand with the plaintiffs in the In Re: Zelis Repricing Antitrust Litigation, a landmark federal case exposing insurer collusion that suppresses out-of-network reimbursement rates and undermines fair competition.

This resolution urges the ADA to provide expert resources, financial support, and data through the Health Policy Institute (HPI) to aid the case, strengthen enforcement of the Competitive Health Insurance Reform Act of 2020, and push the U.S. Department of Justice and Federal Trade Commission to investigate alleged anticompetitive practices in dental insurance.

#### **IF YOU VOTE NO**

A NO vote accepts a weaker approach where the ADA limits its involvement to passive observation. It signals tolerance for insurer manipulation of dental reimbursement and forfeits an opportunity for the ADA to defend dentists and patients in one of the most important antitrust actions since the repeal of McCarran-Ferguson immunity.

#### **SUMMARY**

Resolution 507 calls for the ADA to actively support plaintiffs in a national class-action antitrust lawsuit against Zelis Healthcare and major insurers including UnitedHealth, Aetna, Cigna, Humana, and Elevance Health. The lawsuit alleges a coordinated scheme to fix and suppress dental reimbursement rates using shared repricing algorithms.

The resolution authorizes the ADA to:

- Provide financial and expert support through the HPI,
- Share relevant data and analytics,
- Collaborate with plaintiffs' counsel and regulators, and

- File or assist in amicus briefs defending fair competition and transparency.

This case directly aligns with ADA-adopted priorities for insurance reform, transparency, and advocacy for fair reimbursement. It would demonstrate that the ADA stands behind its own members and the patients they serve.

#### We Appreciate the Board's Support

The Board's substitute version (507B) retains most of the author's intent and recommends a YES vote. The substitute modestly refines administrative language while preserving the ADA's commitment to support plaintiffs and use HPI data in the litigation.

The Board's support shows recognition that this lawsuit addresses the systemic insurer behavior the ADA itself documented in its May 2025 DOJ public comment on the lack of competition in dental insurance. The House should endorse full participation and ensure adequate funding to protect dentists and patients nationwide.

#### **TALKING POINTS**

- The Zelis lawsuit is the first major test of the Competitive Health Insurance Reform Act of 2020.
- ADA data and expertise can strengthen the case and advance member interests.
- Insurer collusion directly harms dental practices and patient access.
- Supporting this litigation aligns with ADA public policy on transparency and competition.
- The Board's substitute maintains fiscal oversight while affirming the ADA's moral and legal role.
- A YES vote puts the ADA on the side of its members and the profession's integrity.



Prepared by Dentistry in General Advocacy Coalition

#### Resolution 508 - Amendment to the ADA Election Commission and Campaign Rules

Author: Dr. Spencer Bloom, Delegate

#### IF YOU VOTE YES

A YES vote supports the action requested in the resolving clauses. This resolution replaces the existing ADA Election Commission and Campaign Rules with a single, modernized framework that promotes fairness, transparency, and nonprofit compliance. It removes outdated barriers that favor incumbents, eliminates veto power over campaign appearances, sets contribution limits, and allows modern digital communication tools such as podcasts, livestreams, and social media. It ensures that all candidates have equal access to delegates, standardizes enforcement, and requires financial disclosures to strengthen trust and integrity in ADA elections.

#### IF YOU VOTE NO

A NO vote keeps the current system in place, which allows structural inequities, insider advantages, and unrestricted campaign spending. Voting NO protects rules that limit access for newer candidates, allow single-candidate vetoes over campaign events, and exclude digital engagement tools. It also accepts the ongoing risk of reputational harm and inconsistent enforcement under current Board-controlled procedures.

#### **SUMMARY**

This resolution overhauls the ADA's election and campaign process to make it fair, transparent, and inclusive. It aligns ADA election conduct with 501(c)(6) nonprofit standards by ensuring equal access for all candidates, placing spending limits, introducing financial transparency, and supporting modern campaign methods that do not depend on wealth or insider access. It protects ADA's credibility, empowers members, and updates rules that have not kept pace with ethical and digital norms.

#### Why the Board Is Wrong

The Board unanimously voted NO, citing the existence of a separate task force and claiming the proposal is "deficient." This response ignores that the resolution provides a complete, fully documented framework—including a side-by-side comparison of every change—and directly addresses fairness and access concerns that the Board's own task force did not resolve. Relying solely on the Board's internal task force preserves control over campaign procedures by those already in power. The Board's version in Resolution 515 was written without open member input and leaves the same structural inequities intact. Resolution 508 provides the comprehensive reform that members and delegates have repeatedly requested: equal access, transparency, and accountability.

#### TALKING POINTS

- ADA election rules must reflect nonprofit fairness and equal access, not insider privilege.
- Eliminates "announcement timing" advantage and allows all qualified members to run on a level field.
- Removes single-candidate veto power over forums and appearances.
- Caps campaign contributions and requires financial transparency for all candidates.
- Modernizes communications by allowing social media, podcasts, and livestreams under ethical oversight.
- Reaffirms that campaign fairness strengthens ADA integrity and member trust.
- The Board's "task force version" fails to fix the core inequities that Resolution 508 corrects.



Prepared by Dentistry in General Advocacy Coalition https://dentistryingeneral.com/digac

### Resolution 509 - Fully Funded ADA Advocacy Realigned with Dentist Priorities Through State-Focused Investment and National Collaboration

Author: Dr. Steven Saxe, Delegate

#### IF YOU VOTE YES

A YES vote supports the action requested in the resolving clauses. This resolution requires the ADA to fully fund and prioritize advocacy that directly benefits member dentists and patients. It calls for maintaining and expanding all advocacy budgets, requiring annual increases tied to inflation, and targeting a \$25 million annual advocacy investment within five years. It redirects 80% of advocacy spending toward state-led initiatives where results are real and measurable and dedicates 30% of all advocacy resources to fixing dental insurance abuses like network leasing, third-party payments, and weak dental loss ratio laws.

#### IF YOU VOTE NO

A NO vote supports the status quo: a top-down advocacy strategy centered in Washington, D.C., with high costs and minimal results. It defends continued spending on consultants and federal lobbying that has failed to deliver meaningful change for practicing dentists. A NO vote accepts that ADA advocacy will remain misaligned with member priorities and disconnected from state-level success stories that actually improve dentists' daily lives.

#### **SUMMARY**

This resolution ensures that ADA advocacy reflects the priorities of the dentists who fund it. Members overwhelmingly list advocacy as their top reason for joining the ADA, yet millions have been spent with little return. By shifting the focus and funding to state-based issues such as insurance reform, fair reimbursement, and transparency, Resolution 509 brings advocacy back to where it works. It also mandates clear reporting to show members how their dues are used and what wins are achieved each year.

#### Why the Board Is Wrong

The Board voted NO, claiming the resolution lacks fiscal detail and could limit flexibility. This argument misses the point: the ADA has had decades of flexibility and has failed to deliver results that matter to members. Resolution 509 does not create chaos, it creates accountability. It defines measurable advocacy goals, prevents diversion of funds, and demands transparency in spending. By opposing this, the Board defends the same federal-heavy structure that has cost millions without improving dentists' financial or regulatory environment.

#### TALKING POINTS

- ADA advocacy spending must reflect what dentists value most: results.
- Redirects funding to the states where legislative victories actually happen.
- Preserves all advocacy positions and adds CPI-based annual growth.
- Prioritizes insurance reform—dentists' number-one concern nationwide.
- Creates annual public reporting so members can see exactly what they're getting.
- Ends wasteful top-down lobbying and refocuses ADA on real, measurable wins.
- A YES vote puts advocacy back in the hands of dentists, not consultants.



Prepared by Dentistry in General Advocacy Coalition https://dentistryingeneral.com/digac

#### Resolution 517 - Amendment to ADA Policy on Medical (Dental) Loss Ratio

Author: Dr. Spencer Bloom, Delegate

IF YOU VOTE YES

A YES vote supports the action requested in the resolving clauses. This resolution strengthens and clarifies ADA Policy on the Medical (Dental) Loss Ratio (DLR) by closing loopholes and aligning policy with the successful Massachusetts Question 2 model. It specifies that benchmarks of 85% for large group and 83% for small/individual plans must apply to each insurance plan, not market-wide averages, and requires transparency, public reporting, and plan-level accountability. It also directs the ADA to develop model statutory language and implementation guidance for states to use, ensuring insurers rebate excess profits and comply with fair limits on administrative spending.

#### IF YOU VOTE NO

A NO vote defends weak and inconsistent DLR policy language that allows insurers to manipulate averages and avoid meaningful compliance. It maintains loopholes that exaggerate loss ratios through charitable donations, broker commissions, and non-clinical activities. A NO vote accepts continued insurer control and fails to protect dentists and patients from inflated administrative costs and poor value.

#### **SUMMARY**

Resolution 517 updates ADA DLR policy so it reflects real-world performance standards that hold dental insurers accountable. It ensures each plan—not the market as a whole—must meet the DLR threshold, eliminates non-clinical cost padding, and requires public disclosure of plan data, surplus levels, and rebate mechanisms. This gives state dental societies the tools to negotiate or legislate strong DLR laws modeled after Massachusetts' success and ensures ADA remains the leading voice for fair, transparent dental insurance reform.

Board of Trustees — Thank You for the Referral

We Trust the ADA Agencies Will Act Promptly

The Board recommended referral to the Council on Dental Benefit Programs, recognizing that the maker's intent has merit. The proposed clarifications strengthen the ADA's ability to influence state and national reform, and prompt referral will ensure that these protections become part of official ADA policy without delay.

#### **TALKING POINTS**

- Strengthens ADA's official DLR policy with plan-level accountability.
- Ends manipulation of loss ratio averages by requiring per-plan compliance.

- Adopts Massachusetts' model as the national benchmark for fairness.
- Prevents insurer loopholes using broker fees, charity, or QIA padding.
- Requires transparency, public reporting, and timely rebates to purchasers.
- Protects patients and providers from inflated premiums and hidden profits.
- The Board's referral allows ADA to move this forward with speed and focus.



Prepared by Dentistry in General Advocacy Coalition https://dentistryingeneral.com/digac

## ALERT: HOSTILE AMENDMENT BY THE BOARD OF TRUSTEES

#### Official House Resolution and Board Comments Attached

Resolution 519 - Enable Member Participation in Governance by Allowing Resolution Submission by ADA Members

Author: Dr. Steven Saxe, Delegate

IF YOU VOTE YES

A YES vote on Resolution 519 supports the action requested in the resolving clauses. It protects the right of every ADA member to have a voice in their own Association by allowing any three members in good standing to co-submit a resolution directly to the House of Delegates. This creates a fair, transparent pathway for ideas from the membership to reach the floor for open discussion. Resolution 519 does not weaken order or structure. It keeps all existing safeguards such as formatting requirements, submission deadlines, and reference committee review. It simply ensures that member ideas cannot be blocked, delayed, or altered before reaching the House. Immediately after you vote YES on Resolution 519, you must vote NO on 519B. The Board's substitute version is a direct assault on member participation. It not only rejects the right of members to submit resolutions, it also eliminates the right of individual delegates to do so. It takes power away from both the members and their elected representatives.

#### IF YOU VOTE NO

A NO vote on Resolution 519 supports the current restrictive system and the Board's proposed substitute, 519B. That version removes the right of members to submit resolutions and strips away the ability of individual delegates to bring forward new business. It concentrates all control at the top, turning what should be a member-driven professional association into a system where ideas flow only one way: downward. Voting NO is not a neutral choice. It is a vote to silence members and weaken the House of Delegates. It is a vote for hierarchy over representation, and it continues a disturbing pattern of the Board consolidating power while limiting the voice of those it serves.

#### **SUMMARY**

Resolution 519 restores balance to ADA governance. Under the current Standing Rules, only agencies, constituent societies, trustee districts, and individual delegates can file resolutions. Regular ADA members, those who pay dues, treat patients, and sustain the Association financially, have no direct path to bring forward their own ideas. The proposed change adds just one phrase: 'and any three members in good standing.' This is a simple, transparent reform that broadens participation and demonstrates that the ADA truly belongs to its members. The Board's substitute version (519B) reverses that intent. It not

only blocks members from submitting resolutions, it goes further by removing the existing right of individual delegates to do so. This is a hostile amendment that would permanently shift control away from the House and toward the Board of Trustees. It is an unmistakable attempt to take power from the many and hand it to the few.

#### Why the Board Is Wrong

The Board claims that its substitute ensures fiduciary oversight and structural order. In truth, it dismantles one of the most fundamental rights in a member-governed association: the ability of delegates and members to initiate policy. This is not about efficiency. It is about control. For years, the Board has slowly increased its authority while reducing transparency and accountability to the House of Delegates. The substitute version of 519 is part of that pattern. It would give the Board the ability to block ideas before they ever reach the House, effectively controlling the entire policy pipeline. Delegates are not employees of the Board; they are the elected representatives of the profession. The House of Delegates is, by ADA Bylaws, the supreme authority of the Association. Allowing the Board to silence both delegates and members is an unacceptable power shift. The ADA cannot claim to be member-driven if it prohibits members from driving change.

#### TALKING POINTS

- Resolution 519 empowers members by allowing any three members in good standing to submit a resolution.
- Keeps all safeguards: proper formatting, submission deadlines, and reference committee review.
- Expands access to the House without sacrificing structure or oversight.
- The Board's substitute, 519B, removes the right of members and delegates to file resolutions.
- Centralizes power within the Board of Trustees and weakens the House of Delegates.
- Continues a clear pattern of the Board reducing transparency and controlling governance outcomes.
- Voting YES on 519 and NO on 519B protects democracy within the ADA and preserves the rights of every member and delegate.
- The House must not allow its authority to be diminished or its voice silenced.



Prepared by Dentistry in General Advocacy Coalition https://dentistryingeneral.com/digac

#### Resolution 520 - Strengthening ADA Transparency to Grow and Retain Membership Through Majority and Minority Board Reports

Author: Dr. Steven Saxe, Delegate

#### **IF YOU VOTE YES**

A YES vote supports the action requested in the resolving clauses. This resolution calls for the ADA Board of Trustees to prepare and publish written majority and minority reports for significant Board votes, ensuring that the reasoning behind decisions is transparent, recorded, and available to members. It promotes accountability, openness, and trust by requiring that the Board's rationale—both for and against—be made part of the permanent record and accessible to the public and members on ADA.org.

#### **IF YOU VOTE NO**

A NO vote keeps the current system where dissenting opinions by the Board are not published and members must personally contact individual trustees to learn the reasoning behind votes. This defends a closed culture that discourages open discussion and keeps members in the dark about major decisions affecting the profession.

#### **SUMMARY**

Resolution 520 amends ADA Bylaws Chapter V, Section 80, by adding a new duty requiring the Board of Trustees to prepare and publish written majority and minority reports for all votes involving major policy, financial, advocacy, or governance actions. These include policy changes, dental insurance issues, compacts, legislative advocacy, financial commitments over \$250,000, or any change to the structure or authority of the House, Board, or standing committees. For all other votes, a report must be produced upon request of any ADA member. This measure ensures transparency, documents debate, and allows members to see how and why decisions were made—restoring confidence in governance and encouraging broader participation.

#### WHY THE BOARD IS WRONG

The Board argues that minority reports are already "an available option" under parliamentary procedure and that requiring them would burden operations. In reality, optional systems have failed to produce consistent transparency, leaving members uninformed. Merely allowing dissenting members to "be contacted" does not meet the standard of public accountability or written record required in professional governance. The Board's claim that this requirement would "chill debate" reverses the truth:

transparency fosters honest discussion, protects dissenting voices, and assures members that debate occurred before decisions. The resolution follows the long-established practices of the AMA, Congress, and the Supreme Court, all of which maintain written majority and minority reports as a cornerstone of legitimacy and trust.

#### **TALKING POINTS**

- A YES vote creates an official record of both majority and minority viewpoints, increasing transparency and trust.
- Members have the right to know how and why the Board makes decisions that affect them.
- Optional procedures have not delivered consistent transparency; this resolution makes it a duty.
- Majority/minority reporting is standard in respected institutions and essential for credibility.
- Transparency strengthens, not weakens, unity and confidence in leadership.
- The ADA's own values—Integrity, Excellence, and Commitment to members—demand openness.



Prepared by Dentistry in General Advocacy Coalition

#### Resolution 522 - Transparency in Dental Practice Ownership, Management, and Outside Investors

Author: Dr. Spencer Bloom, Delegate

#### **IF YOU VOTE YES**

A YES vote supports the action requested in the resolving clauses. This resolution establishes ADA policy requiring transparency in dental practice ownership and control. It ensures that patients can clearly see who owns and manages their dental office, including any Dental Service Organizations or outside investors that hold financial or operational control. A YES vote affirms that patients have the right to know who is ultimately responsible for their care and that licensed dentists retain accountability for all treatment decisions.

#### IF YOU VOTE NO

A NO vote protects the current system that allows private equity and management firms to hide behind layers of corporate structure. It leaves patients unaware of who truly controls their dental office and weakens accountability when problems arise. It accepts the continued blurring of lines between clinical responsibility and investor control, putting financial interests ahead of patient trust.

#### **SUMMARY**

Resolution 522 adopts a new ADA policy on transparency in ownership, management, and outside investors. It encourages state dental boards to require that every dental office clearly disclose:

- 1. The name of the registered owner and licensed dentist(s) responsible for patient care.
- 2. Any management company, DSO, or investor with a controlling interest.
- 3. Visible posting of this information at the front desk, on websites, signage, and marketing materials.

This transparency aligns with state laws in Illinois, Oregon, and Washington that affirm a dentist's ultimate clinical accountability. It also follows existing federal disclosure standards under 42 CFR § 455.104 for healthcare ownership. The goal is not to restrict business models but to restore clarity, integrity, and trust for patients and practitioners alike.

#### WE APPRECIATE THE BOARD'S SUPPORT

While the Board questioned background wording, it endorsed the substitute resolution 522B and recommended a YES vote. The substitute still supports public transparency and

state-level adoption of ownership disclosure rules. DIGAC welcomes this support as a step toward protecting patients, clarifying accountability, and reinforcing professional ethics.

#### **TALKING POINTS**

- Transparency in ownership protects patients and reinforces ethical accountability.
- Patients have a right to know who controls their dental office.
- Non-dentist investors must not obscure who is responsible for care decisions.
- This mirrors federal disclosure rules and modernizes ADA ethics for today's market.
- Honest, visible ownership information strengthens public trust in dentistry.
- A YES vote aligns with integrity, professionalism, and patient-first values.



**Prepared by Dentistry in General Advocacy Coalition** 

## Resolution 527 - Coordinating Dental Advocacy Through a National Task Force for Greater Unity and Impact

Author: Dr. Steven Saxe, Delegate

#### **IF YOU VOTE YES**

A YES vote supports the action requested in the resolving clauses. This resolution directs the ADA to convene a Dental Advocacy Alignment Task Force to improve coordination among major dental organizations, reduce duplication, and strengthen advocacy impact. It calls for collaboration among the ADA, ADEA, AGD, AAOMS, state societies, and specialty groups to unify strategies, ensure efficient use of resources, and include early-career dentists in the process.

#### **IF YOU VOTE NO**

A NO vote maintains the status quo, where advocacy remains fragmented across multiple organizations with overlapping goals and disconnected messaging. This wastes member dues, weakens the profession's influence, and undermines our collective voice in public policy. Saying no keeps dentistry divided when unity is essential for national advocacy strength.

#### **SUMMARY**

Resolution 527 establishes a cross-organizational Dental Advocacy Alignment Task Force to bring together major stakeholders in dentistry for coordinated advocacy. The group would identify shared goals, reduce redundant efforts, and report back to the House of Delegates by 2026. Representation would include national organizations, state societies, specialty groups, and at least one new dentist within 10 years of graduation. By collaborating instead of competing, organized dentistry can present unified positions to lawmakers and the public, saving resources and amplifying influence.

#### WHY THE BOARD IS WRONG

The Board claims the ADA already communicates regularly with other organizations and that coordination is "sufficient." However, communication is not the same as strategy. Occasional meetings or shared conferences do not replace structured, goal-oriented collaboration. This resolution formalizes coordination, sets measurable objectives, and ensures accountability through a report to the House. Rejecting this resolution means continuing fragmented advocacy that weakens dentistry's national presence. The Board's "Vote No" recommendation protects inefficiency instead of embracing leadership. True unity requires intentional, transparent alignment—not casual contact.

#### **TALKING POINTS**

- A YES vote strengthens the ADA's leadership role in national advocacy.
- Coordination across dental organizations reduces waste and duplication.
- Fragmented advocacy confuses policymakers and weakens our influence.
- This task force ensures younger dentists have a voice in advocacy strategy.
- A unified approach demonstrates professionalism, efficiency, and vision.
- Dentistry needs one strong voice—not scattered messages—to protect our profession and patients.



Prepared by Dentistry in General Advocacy Coalition