



American
Academy of
Dermatology
Association



2024

Governance Handbook

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American Academy of Dermatology

The American Academy of Dermatology (AAD), founded in 1938, is the largest, most influential, and most representative of all dermatologic associations.

With a membership of more than 20,600 physicians worldwide, the AAD is committed to: advancing the diagnosis and medical, surgical, and cosmetic treatment of the skin, hair, and nails; advocating high standards in clinical practice, education, and research in dermatology; and supporting and enhancing patient care for a lifetime of healthier skin, hair, and nails.

American Academy of Dermatology Association

The American Academy of Dermatology Association, the advocacy arm of the Academy (AADA), provides a voice to dermatologists, ensuring that public policies address the ever-changing needs of practices and patient care. The AADA provides members with valuable resources and tools to adapt to the shifting health care landscape while contributing to policies that protect the quality of and access to dermatologic care.

Operations

Executive Office

The Executive office is divided into two teams, Operations and Governance. The Operations Team supports the Executive Director & CEO and the Executive Team members in facilitating the Academy's operation plan through administrative and strategic support. The CEO provides oversight for all staff in the development and implementation of all American Academy of Dermatology/Association (AAD/A) programs and activities.

The Governance Team is responsible for the implementation of Board policy. Arrange the Board of Directors meetings, including the development and preparation of Board meeting agendas, minutes, follow-up items, planning for meeting logistics and travel arrangements. It also plans the Officer teambuilding and onboarding and the Board orientation and onboarding, including the development and preparation of its presentation and all materials received.

In addition, it:

- Provides staff support for the Executive Committee and certain Committees of the Board of Directors including the Bylaws Committee, Professionalism and Ethics Committee, Nominating Committee, Organizational Structure Committee, Academy Former Presidents Committee, the AAD/A Advisory Board and miscellaneous Ad Hoc Task Forces and committees as required.
- Provides support for the President; coordinate all correspondence for the President as well as the officers, in addition to maintaining President's master travel calendar. Coordinate communication between the officers and directors and the membership.
- Manages the appointment process for Councils, Committees and (Ad Hoc) Task Forces including solicitation of members, appointments, and database maintenance. Serve as a resource for staff and members with governance questions and inquiries.
- Plans and executes the annual recognition ceremony.
- Manages the nominations and election process for AAD/A officers, directors, and nominating committee representatives, including the solicitation of vendors.
- Coordinates general counsel and other professional services as may be required to carry out the business of the Board. Coordinates general counsel services for AAD/A issues and handles ethics complaints.
- Maintains current and historical records of the AAD/A, including Articles of Incorporation, Bylaws, Administrative Regulations and Governance Policies.
- Serves as a resource for all officers and directors of the Board, no matter what the question.

Operations

Operations Department provides efficient, cost-effective services and related administrative support for the AAD/A membership and employees. Key services include:

Rosemont Office

- Office services, including mail and shipping services, supply management, maintenance and stocking of pantry areas, and duplication and laminate services as needed.
- Catering and meeting set up for internal meetings.
- Security system management and administration.
- Lease management and liaison with building management.
- Maintenance of internal office space and furnishings.
- Intranet administration.
- Coordination of organization wide standard operating procedure and processes.
- Maintenance of the Academy's business continuity and emergency and disaster response plans.
- Managing the Academy's record retention policy.

Washington DC Office

- Facilities management, support including liaison with building management & management of facility contractors.
- Records retention program.
- Disaster response and recovery program management.
- Inventory and asset control program.

[Finance](#)

The Finance Department maintains, monitors, and controls all financial activities of the AAD/A. Their responsibilities include budgeting and financial reporting, risk management, cash receipts processing, accounts payable, invoicing/accounts receivable, payroll and benefits processing, the annual audits, tax returns, etc.

The financial activities also include cash management and monitoring the investment activities of the AAD/A and its affiliates. All investments are managed in conjunction with professional investment managers.

The Finance Department maintains the AAD/A's computerized financial databases. Management is provided with monthly financial statements that reflect current month and year to-date information on revenues and expenses along with budget and forecast comparison analysis.

The Finance Department works closely with the Secretary-Treasurer of the AAD/A and supports certain Board committees: Audit Committee, Budget Committee, and Investment Committees.

[Human Resources](#)

The Human Resources Department (HR) provides high quality service and programs to attract, develop, motivate, and retain a diverse workforce within a supportive work

environment. Key activities include:

Talent Management:

- Recruitment
- Onboarding
- Retention
- Engagement
- Performance Management

Total Rewards:

- Total Compensation Administration
- Benefit Administration
- Recognition Programs
- Work-Life Balance Programs
- Employee Events and Activities
- Professional Development

Organizational Development:

- Cultural Change Initiatives
- Organizational Training and Development
- Organizational Effectiveness and Alignment

Risk Management:

- Compliance – Regulatory, Federal and State Legislative
- Employment Liability

Information Technology

The Information Technology Department (IT) is responsible for the enterprise-wide network and telecommunications infrastructure, installation and maintenance of user technology, business/website software applications, and computer-related employee training. The department is also responsible for user support as well as onsite technical support at AAD/A meetings. Key activities include:

- Researching, recommending, procuring, and managing IT infrastructure in Rosemont and Washington D.C offices. This includes membership data, web servers, email, phone systems, general ledger and other systems and technology purchases. Additionally, responsible for remotely located technology and cloud services.
- Custom development for AAD/A website including tight integration to the membership database. Management of the technology powering the website as well as associated services and programs that interact with the website. Provide technology support to LMS and Community platforms.
- Mobile application procurement and internal development.
- Management and programming on the AAD/A's membership database (known as an AMS, Association Management System)
- Procurement and support of internal end user PCs, software, mobile devices, desktop telephones, scanning and eFax.
- Creating and implementing disaster recovery plan for critical technology

applications and infrastructure.

- General IT project support and analysis, including recommending new technology that may improve business functions.
- Resource for all Board members; no matter what the question.

Marketing Communications

Public Positioning

Our current positioning campaign, Your Dermatologist Knows™ aims to educate the public about the role of a dermatologist in the care of their hair, skin, and nails. It features AAD members and ambassadors and utilizes social media, traditional media, and web stories to illustrate patient care aspects directly from our members to the public. Our aim is to utilize traditional and social media outlets to gain awareness of board-certified dermatologists, the importance of seeing an FAAD and the conditions dermatologists treat with the general public. This is in addition to our Melanoma Monday and Skin Cancer Awareness activities each May and our National Healthy Skin month activities in November and our general media outreach throughout the year.

Our specialty positioning campaign, SkinSerious™, aims to address the misperceptions surrounding dermatology within the house of medicine and among other key influencers in the payer, policy, and regulatory communities. The goals of the campaign are to show that access to dermatology expertise saves lives and creates efficiencies in the health care system.

[Advocacy communications](#)

The changing healthcare environment is impacted greatly by regulatory and policy reform that remains in flux. Our team works to define and communicate developments as they happen and create calls to action for members as well as manage any media requests resulting from these issues, specifically working with the advocacy agenda to bring attention to practice issues affecting the specialty.

[Membership support](#)

The marketing team contributes to the set up and maintenance of membership categories, education, and products & services pricing and revenue, as well as annual recruitment and retention campaigns. All AAD | A products are supported by our marketing, publishing, advertising, and creative teams.

[Useful, practical member-focused news](#)

The creative and publishing teams create the *Dermatology World* portfolio including digital and print specialty publications for scientific meetings, as well as publications generated for special audiences. This team creates the quarterly *Impact Report* that highlights the accomplishments of the AAD on issues members care about the most. The Web team and social media teams work together to deliver news to members and the public in electronic format as well, populating separate member and public sections. Our communications vehicles are frequently awarded national recognition for design and delivery of information.

[Medical Journal of Record](#)

The JAAD medical journal team manages the official scientific journals of record in the American Academy of Dermatology (AAD) portfolio including our flagship journal *JAAD*, *JAAD Case Reports (JDCR)*, *JAAD International* and soon to launch *JAAD Reviews* scholarly journals. *JAAD* currently holds the #1 spot in dermatology journals in impact factor and *JDCR* is gaining ground in citations. *JAAD International*, launched in July 2020, and has been indexed in PubMed Central, Scopus, EMBASE, Directory of Open Access Journals, and Google Scholar.

Advocacy & Policy

The American Academy of Dermatology Association's (AADA) Advocacy & Policy (A&P) Department, based in Washington, D.C., is composed of the following primary areas, the work of which is closely aligned and integrated. Those areas are as follows: DC Operations, Grassroots Outreach and Development, Federal Legislative and Political Advocacy, Regulatory and Payment Policy, State Policy, Private Payer Advocacy.

Together, these areas develop and implement strategies designed to promote policies that:

- 1) facilitate medical education, research, disease prevention and public awareness of the uniqueness of dermatologic conditions and patient care;
- 2) seek to strengthen the physician-patient relationship;

- 3) ensure patient access to high quality dermatologic care, and
- 4) facilitate efficient operation and regulatory compliance of members' practices.

This mission is fulfilled largely by helping to forge strong relationships and partnerships between and among AADA members, dermatologic societies including state societies, members of Congress, state lawmakers and their staffs, federal and state administration officials, and other representatives of the health care community.

The A&P team works with the leadership of the AADA, Council on Government Affairs and Health Policy and its committees and task forces to position dermatologists as the experts in the diagnosis and medical, surgical, and cosmetic treatment of the skin, hair, and nails with policymakers at the federal and state levels and in the public and private sectors.

The team seeks to increase the AADA's visibility with federal and state agencies and policymaking entities, including, but not limited to, the U.S. Congress, the Food and Drug Administration, the Centers for Medicare and Medicaid Services, and state legislatures, to prioritize government affairs issues with the AADA's membership, and to unify the voice of dermatology by collaborating with subspecialty and patient groups on a regular basis. In that regard, the team serves as the AADA's liaison with other medical specialty and health-related organizations and the American Medical Association.

[DC Operations](#)

The Advocacy & Policy Department is primarily based in Washington, DC, with a few staff located in the Rosemont, IL headquarters office of the Academy. As such, this area provides oversight of all operational aspects of the office including staff coordination, physical infrastructure, security and safety processes and technology efforts.

[Federal Legislative and Political Advocacy](#)

The Federal Legislative and Political Advocacy (FLPA) area of A&P is the primary legislative and lobbying arm of the AADA. Staff work with AADA members on the Congressional Policy Committee, the Grassroots Advocacy Workgroup, and the SkinPAC Board of Advisors to collaborate on pursuing AADA priorities and objectives in this area. Responsible for establishing and maintaining liaison relationships with the U.S. Congress, this area monitors, tracks and analyzes federal legislation, identifying trends and recommending specific courses of action. FLPA also handles requests from Congress, appearances before congressional committees, the development of public testimony, statements, and other such documents, working closely with the Integrated Communications Team to refine and disseminate.

This area of A&P also serves as the primary project lead, working in concert with the grassroots outreach and development area, in coordinating legislative fly-ins to Washington, DC, including the Annual Legislative Conference. It also serves as a primary liaison to many of the broad coalitions including the One Voice Against Cancer Coalition,

National Council on Skin Cancer Prevention, the Patients' Access to Treatment Coalition and the Health Coalition on Liability and Access.

The AADA's political action committee, SkinPAC, is staffed under this area of A&P as well. SkinPAC has been a critical component of the AADA's overall advocacy efforts and the AADA's campaign to be the trusted voice on issues related to dermatology. SkinPAC provides an opportunity to build relationships with lawmakers and earns dermatology a seat at the table when Congress is debating issues that affect dermatology patients, practice, and the profession.

[State Policy](#)

The state policy team, in concert with the State Policy Committee, monitors, analyzes, and prepares positions and strategies to influence or promote state-level issues of relevance to dermatology.

In coordination with the state dermatologic societies, national dermatologic sister societies, patient groups and the state medical societies as appropriate, this area represents or prepares members of the AADA to represent the AADA's position before state legislative and regulatory bodies, directs lobbying of state officials, research legislative and regulatory actions and effectively lobbies on state issues. The state policy team serves as our staff representatives on the Steering Committee of the AMA's Scope of Practice Partnership. This area also regularly showcases the Academy's policy priorities as an exhibitor at the annual National Conference of State Legislatures.

[State Society Relations/Patient Advocacy](#)

This team works to fully engage members with their state, regional and local dermatologic societies through frequent communication and consistent efforts to relay information and opportunities for AAD/A and state societies to collaborate in achieving shared goals. A major focus is to unify and support AAD/A advocacy on behalf of the patients by identifying, building, and strengthening relationships between dermatologists and policymakers at the state levels. This includes expanding the scope and impact of the Patient Advocate Task Force in advocacy and education efforts. In addition, Committee members and AAD/A staff provide strategic and leadership development support to state societies, as well as assistance with organization and structure.

[Regulatory and Payment Policy](#)

The Regulatory and Payment Policy area serves as the primary liaison to and is responsible for the AADA's relationships with federal agencies including, but not limited to, the Department of Health and Human Services, Centers for Medicare and Medicaid Services, Office of the National Coordinator for Health Information Technology, Food and Drug Administration, Centers for Disease Control and Prevention, Environmental Protection Agency, National Institutes of Health, and Agency for Healthcare Research and Quality. Staff actively monitors and responds to regulatory proposals and coverage policies that have the potential to affect the delivery and quality of dermatologic care, analyzes the effects of proposed regulations, and develops and synthesizes material for use by the AADA's Councils, Committees, Task Forces, and leadership in formulating positions and influencing regulatory policies. This area also proactively seeks out opportunities for representatives of the AADA to present testimony before regulatory bodies and to serve on influential policy councils, develops position statements and prepares AADA representatives for such opportunities.

The Regulatory and Payment Policy team provides primary staff support to the Regulatory Policy Committee (RPC), which monitors the supply side of dermatologic pharmaceuticals (including new device and drug approvals for dermatology, issues related to the

manufacture, distribution and promotion of dermatologic drugs and devices, and packaging, labeling and post-market surveillance practices). The RPC and staff work with regulatory agencies to address issues concerning the availability of dermatologic drugs, biologics and devices, and the reporting of adverse events. The successful implementation and/or modification of regulations such as the reclassification of tanning beds and the iPledge program for the administration of isotretinoin are also key.

On the payment policy side, this area coordinates all the activities of the AADA with respect to both Medicare payment policy and private payer advocacy. This includes developing and implementing strategies to positively influence public coverage and reimbursement policies as well as working with the national insurance companies and private health plans. Staff work with the Health Care Finance Committee, the Coding and Reimbursement Committee, the Dermatology Carrier Advisory Committee (DermCAC); the Patient Access and Payer Relations Committee and the Workgroup on Innovations in Payment and Delivery to identify priorities and implement strategies.

In addition, the department provides staff support of the Academy's involvement and activities with the AMA/Specialty Society Resource-Based Relative Value Update Committee (RUC), and the AADA's RBRVS Committee to advance dermatology coding and practice management issues, as well as enhancing the Academy's recognition among the membership, state and national dermatological societies as a reliable source of dermatology coding, reimbursement, regulatory and compliance information.

[Grassroots Outreach and Development](#)

This area of A&P implements strategies for grassroots outreach, including developing and maintaining the grassroots action website, writing, and disseminating action alerts, and calling key members of the AADA when targeted action is required. Staff works to identify and train key contacts, state legislative coordinators, and dermatologists who wish to run for elected office or to seek medical board or other agency appointment. It also holds a key role in planning and executing the annual legislative conference and other member fly-ins designed to build relationships between AADA members and elected officials.

Education and Practice Management

[Education](#)

The Education department is responsible for coordinating the functions and activities of the AAD's Council on Education and the Committees, Task Forces, and Workgroups reporting to this Council. Each of these groups contributes to the AAD's commitment to excellence in patient care and continuing professional development as well as the AAD's strategic goal to design and deliver the gold standard of dermatologic education.

The Education department members are responsible for ensuring compliance with the Accreditation Criteria, Policies, and the Standards for Integrity and Independence in Accredited Continuing Education of the Accreditation Council for Continuing Medical

Education (ACCME), the entity that accredits providers of continuing medical education (CME).

Additionally, the department is responsible for ensuring compliance of the AAD's CME program with the American Medical Association's Physician Recognition Award™ (AMA PRA) rules relative to designation of CME credit. Many AAD Education programs also grant Continuing Certification Program (CCP) credits provided they meet criteria established by the American Board of Dermatology.

The department is responsible for working with members to develop continuing medical education activities that become part of the AAD's CME accredited and non-CME accredited programs. The purpose of the CME program is to advance quality dermatologic care and improve the knowledge, competence, and performance of dermatologists.

Educational content is delivered through live, audio, video, and electronic formats that include:

- Annual Meeting
- Innovation Academy
- Regional Courses
- International programs (non-accredited)
- Dialogues in Dermatology
- Self-Assessment programs such as Question of the Week
- *Journal of the American Academy of Dermatology (JAAD)* CME articles
- *JAAD* CME supplements
- Skin of Color Curriculum
- Annual Meeting On-Demand Courses such as those based on AAD Guidelines of Care
- Core Curriculum (non-accredited)
- Basic Dermatology Curriculum (non-accredited)
- Board Prep Plus for Dermatology Residents (non-accredited)

The department ensures that adult learning principles are employed to develop, implement, and evaluate each educational activity developed by the AAD. AAD measure changes in learners' competence and performance and analyzes the change data to further improve the CME Program.

The department assures the grounding of all accredited CME activities in one or more of the following American Board of Medical Specialties Core Competencies: Patient Care, Medical Knowledge, Practice-Based Learning, and Improvement, Interpersonal and Communication Skills, Professionalism, and Systems-Based Practice. CME activity development is based on the educational needs of dermatologists who practice in the areas of general, medical, pediatric, dermatopathology, and procedural dermatology.

The department is working closely with AAD members to improve diverse patient representation in educational activities by encouraging the Scientific Assembly Committee (SAC) to include diverse populations as course directors and faculty for the Annual and AAD Innovation Academy Meetings and encouraging faculty to include diverse images in content where applicable.

Other programs and initiatives managed by the Education department include:

- CME Transcript Program
- Sulzberger Institute Grants & Innovation in Dermatologic Education Award (IDEA) Grants
- Thomas Pearson Memorial Education Award & Named Lectureships
- Repurposing existing content for licensing opportunities

[Practice Management](#)

The Practice Management department works to support dermatologists and their staff in various practice settings to thrive personally and professionally at every career stage. This includes positioning AADA as the leading source for strategies, content, and tools customized to support dermatologists and their staff. Current activities include development of resources to simplify practice management administrative burdens and ease the stress for physicians and staff in dermatology practices. These resources will enhance practice sustainability and optimization, , and in turn allow members to focus back on providing superior patient care. Additionally, this area promotes the responsible use of telemedicine in dermatology by advocating a core set of standards for telemedicine platform technology and use as well as continue assisting dermatologist members and their practice staff with inquiries related to coding and practice management. The department also provides primary staff support to the Council on Practice Management, Practice Management Committee, Coding and Reimbursement Committee, Teledermatology Committee, Health IT Committee, and AMA Current Procedural Terminology Advisory Committee.

Practice management content is delivered to members through a variety of formats that include:

- Practice Management Center Website
- Dermatology World
- Derm World Weekly
- Derm Coding Consult
- Webinars
- Dialogues in Dermatology
- Coding Question of the Week
- Practice Management Manuals
- Coding Manuals
- Digital Education
- Live Coding Presentations

Development & Revenue

The Development & Revenue department has three key areas of responsibility: (1) securing grants, contributions, and support from organizations and individuals; (2) developing, implementing, and managing national and local philanthropic fundraising events like Skin Cancer, Take a Hike® and (3) developing new product and licensing opportunities in support of the AAD membership.

[Business Development, Licensing, Corporate and Philanthropic Relations](#)

The teams in these areas are responsible for developing strategies, protocols, and policies for generating revenue through corporate support, new product development, licensing, philanthropic events and individual contributions. Working closely with other departments in the AAD/A, CCPR identifies funding needs, prospects, and opportunities to generate revenue to advance the AAD's mission.

The team also raises philanthropic support through individual annual & major gifts and planned giving programs; independent medical education grants, corporate and licensing partnerships, and donations; licensing and cause marketing campaigns, foundation grants and philanthropic fundraising events, such as the annual President's Gala and Skin Cancer Take a Hike®. In addition, the department is responsible for securing medical education grants throughout the year including the Annual Meeting and Innovation Academy.

The Council on Community, Corporate and Philanthropic Relations oversees the development and community service efforts and reports to the Board of Directors.

Strategy, Analytics & Alliances

Strategic Planning

The Strategic Planning team provides staff support for the AAD/A's strategic planning initiatives. In 2023, the Board of Directors approved updated strategic goals and objectives to guide the Academy's work to advance its mission. Building on the foundation of the Strategic Plan, the AAD/A has in the last few years launched several initiatives to inform the advancement of the strategic goals, including an initiative to assess all programs of the AAD/A to ensure alignment of financial and staff resources with the strategic goals and the development of an Operational Plan. The Operational Plan, which is updated and refined annually, adds operational goals to complement the strategic goals, including growing revenue to sustain its mission and operating efficiently and effectively.

Building on this strategic and operational foundation, the Academy has established Key Performance Indicators (KPIs), which measure the overall health and performance of the organization. The KPIs are evaluated, revised and approved by the Board of Directors annually.

Strategic Alliances & International Engagement

The team facilitates the engagement and collaboration of the AAD/A with a range of organizations, including specialty and affiliated organizations, and international societies and members.

In the international area, the team works with physician leaders to coordinate and implement the strategy for international growth and development. Approved by the Board of Directors in 2017 and currently being updated, the International Engagement Strategy identifies objectives to meet the goals of: (1) maintaining and enhancing relevance globally for the Academy; and (2) generating revenue through programs, products and services developed for and/or marketed to international dermatologists.

The team supports and implements the activities of the International Affairs Committee and the World Congress Fund Review Task Force and facilitates the marketing, application, and selection process for each of the international scholarship programs. In addition, the

team hosts the activities at the Annual Meeting aimed at international attendees and scholarship recipients.

[Leadership Institute](#)

The team also is responsible for developing, managing, and coordinating activities and programs of the AAD/A related to leadership development of its members, and it supports and implements the activities of the Leadership Development Steering Committee (LDSC), the Leadership Institute and the Mentorship Work Group.

Working with the members of the Leadership Development Steering Committee, team members plan and conduct the Annual Leadership Forum, which is designed to develop the leadership skills of young physicians. In recent years, the Leadership Forum added a track for mid-career physicians and hosted team building sessions for members of the Board of Directors. The team also supports the LDSC in the development of leadership sessions at the Annual Meeting and AAD Innovation Academy and conducts targeted leadership programs for international young physicians and URM residents. It also supports the Mentoring Work Group in conducting mentorship programs and oversees the William D. James Mentor of the Year Award. In addition, the team implements the annual Academic Dermatology Leadership Program, which focuses on leadership training and mentoring for emerging leaders in academia.

[Research & Analytics](#)

The research and analytics team supports the AAD/A's strategic and operational goals by developing and maintaining a keen understanding of our members and the environment in which they practice. Research staff tracks key statistical information on our members and explores practice trends, target audience and member needs. Through both qualitative and quantitative research methods, the team tests new program/product concepts, and it disseminates member information and research results throughout the organization to facilitate data-driven decisions. The research and analytics team plays a key role in supporting the Academy's key performance indicators by conducting key research initiatives that monitor our progress in achieving the metrics approved by the Board of Directors.

[Meetings & Conventions](#)

The Meetings and Conventions Department is responsible for the overall planning of all AAD/A meetings, including the Annual Meeting, the AAD Innovation Academy, and various other regional (CME) courses, conferences, committees, and Board meetings. The department serves as co-liaison to the Scientific Assembly Committee and to the Exhibitor Advisory Committee.

Planning of the Annual Meeting and AAD Innovation Academy is extensive and detailed. The team works closely with the Scientific Assembly Committee and the Education Department to prepare the scientific programs for each of these meetings. The Annual

Meeting involves, among other tasks: (1) coordinating all requests for meeting space for over 100 committees and 400 ancillary organizations that hold their meetings in conjunction with the Annual Meeting; (2) selling, scheduling and managing over 400 exhibiting companies; (3) managing meeting registration and housing (30+ hotels); and (4) conducting contract negotiations/management for all of the ancillary services (i.e. hotels, convention centers, audio visual, shuttle services, general contractor/drayage, and entertainment). The AAD Innovation Academy involves many of the same tasks, but on a smaller scale.

Throughout the year, the department is responsible for managing logistics and arrangements for all AAD/A regional (CME) meetings, the Legislative Conference, the Leadership Forum, the Industry Summit, essentials conferences, international conferences, and committee/other meetings (including all Board meetings).

[Member Relations and Engagement](#)

The Member Relations and Engagement Department supports and advances the AAD/A's Strategic and Operational Plans by maximizing recruitment of new members; identifying relevant ways to engage member segments and demonstrate the economic value of membership, creating affinity and strengthening loyalty to AAD/A; advancing both member and specialty visibility and perception within their communities and demonstrating how members and the specialty works to expand access to care, especially among underserved populations. This department also leads the Academy effort to address health inequities through diversity, equity and inclusion initiatives.

Member Relations and Engagement staff serve as liaisons to the following councils, committees and task forces: Council on Member Services, the Academy Historian, Membership Committee, Resident/Fellows Committee, Young Physicians Committee, Diversity Committee, Intersociety Diversity Task Force, Community Outreach Programs Committee, Education and Volunteers Abroad Committee, and Melanoma/Skin Cancer Community Programs.

[Membership Operations](#)

The Membership Operations team is responsible for the day-to-day management of membership applications, and recruitment and retention of members. In addition, this team has responsibility for maintaining member data integrity. This team oversees the administration of select Resident Member benefits and provides high quality service to members and constituents through the Member Resource Center.

[Member Engagement](#)

The Member Engagement team leverages Research & Analytics work to develop deep understanding, insight, and measurement among all member segments (career stage, practice setting) and the physician ecosystem to develop organizational-wide strategies that create value and satisfaction, and drive life-long retention and loyalty. The team works

with member leaders to enhance member value among Residents, Young Physicians, and Late Career members in a variety of practice settings. In addition, this team is responsible for driving strategy and identifying opportunities to develop and enhance the member value proposition and benefit portfolio to maximize dues revenue and extend the AAD/A's impact and value throughout the physician ecosystem.

[Diversity, Equity, and Inclusion](#)

Working closely with member leadership, this team works to address health care disparities and increase access to dermatologic care by 1) promoting diversity, equity, and inclusion within the AAD/A; 2) ensuring dermatologic education and research encompasses health disparities and skin of color; 3) increasing the number of practicing dermatologists who are underrepresented minorities; and 4) expanding Advocacy priorities to address health inequities. Programs include the Diversity Mentorship program and other workforce pipeline initiatives, the Diversity Champion Workshop, the Skin of Color Curriculum and image collections development.

[Community Relations & Outreach](#)

The Community Relations team is responsible for programs that tangibly demonstrate and highlight the value and impact of the specialty in the communities that our members live, work and play in ways that benefit dermatologists and patients, and influence key constituencies. Programs such as Skin Cancer Screenings, Shade Structure Grants, Good Skin Knowledge and Camp Discovery serve to advance the specialty by providing easy-to-implement awareness programs that elevate both members' and the specialty's profile in their communities.

The team also implements programs that demonstrate the specialty's commitment to providing access to care by managing the Academy's provider-to-provider telemedicine program for federally qualified health care and rural clinics, and strategically partnering with and leveraging established mechanisms for reaching underserved populations.

Science and Quality

The Science and Quality Team (S&Q) supports the specialty of Dermatology, and practicing dermatologists, by documenting and disseminating the state of the science in the ever-changing practice environment. The S&Q Team, in collaboration with AAD members carefully track and codify the expansion of evidence-based dermatologic clinical research and science to advance the delivery of dermatology care. S&Q provides the data-driven foundation for innovation in dermatologic care delivery through our National Qualified Clinical Data Registry (DataDerm), the development of clinical practice guidelines, appropriate use criteria and performance measures. Additionally, the team provides data driven quality and value tools, quality benchmarking and analysis with the goal of optimizing the quality, safety, and value of dermatologic care.

Clinical Guidance

This team focuses on providing an evidence-based foundation for the AAD clinical practice guidelines, appropriate use criteria (AUC), and other initiatives, with an additional emphasis on translation of clinical research and guidance into physician practice. Current activities include developing clinical practice guidelines and Appropriate Use Criteria (AUC), offering outcome-based education, serving as an external/internal source of scientific information and a liaison to external groups, disseminating position statements on healthcare policy, and reviewing and guiding payment policies. The Clinical Guidance area also supports the advancement of dermatologic clinical research. The AAD's Research Agenda encourages research by residents/young dermatologists through award recognition and fellowship programs. The AAD's commitment to clinical research, codifying the state of the science of dermatology in clinical guidance documents, and fostering high quality, evidence-based dermatology is of great value to the specialty, and will continue to position the Academy as an influential and trusted voice.

DataDerm Registry

The DataDerm Team oversees our registry and works to expand participation and use of the dataset for quality improvement and health services research purposes. The American Academy of Dermatology's DataDerm™ is the largest dermatologic clinical data registry in the world. DataDerm is recognized by the Centers for Medicare and Medicaid Services to be a *qualified clinical data registry (QCDR)*, providing benchmarks to participants on the Merit Based Incentive Payment System (MIPS) program performance measures and allowing deep data analysis of the practice of dermatology through the addition of aggregated data sets. It connects data on millions of patients from thousands of dermatologists nationwide, and it provides powerful research and quality assurance tools. DataDerm was created by dermatologists for dermatologists. Since its inception in 2016, over 5,000 clinicians have contributed data on nearly 15 million patients and approximately 54 million patient visits. DataDerm allows clinicians to benchmark performance against peers, track trends in patient populations, and drill down to individual patients for key best practices. Participants also can access a full range of data, enabling comparison of the types and severity of diseases seen, across diverse patient demographics. In addition, DataDerm provides unique opportunities for clinical education and informs advocacy initiatives.

Quality Area

This team focuses on advancing the delivery of dermatology care and helps demonstrate clinical quality and value for the specialty and for dermatologists. These contributions are achieved by being primary source of information for improving care delivery in the practice of dermatology via AAD's clinical registry (DataDerm) and providing the data-driven foundation for innovation in dermatology care delivery. The performance measures area works proactively to expand the number, value, and type of dermatology-specific measures available to dermatologists. Dermatology measures are needed to drive improvement in

care delivery, while meeting the reporting requirements of the Centers for Medicare and Medicaid Services (CMS) and other payers, as well as Continuing Certification requirements. Current Quality Area activities include), developing and testing performance measures, developing tools and resources to help members maximize their public reporting and improve quality of care, liaising to external groups, developing policy on quality measurement, and advocacy work around public reporting of quality measures, and payment reform towards paying for quality and value.

[Research and Operations](#)

The research and operations team provides research services to requests from across the Academy and our membership. They over see the Young Investigator Awards and the Hair Research grant awards. The Research team also oversees the activity of the Augmented Intelligence Committee as well as providing administrative services for the 15 Expert Resource Groups.

Council, Committee and Task Force Structure

The standing governance organizational structure of the Academy and Association (AAD/A) consists of councils, committees, and task forces (CCTF). Issue driven workgroups may also be appointed under a council, committee or task force. In addition, there are ad hoc task forces that are appointed by the president and report directly to the board of directors for special projects.



Task Forces report to committees, committees report to councils, and councils report to the board. Task force chairs are members of the committees to which their task force reports; committee chairs or designated representative are members of the councils to which their committee reports.

The composition of each CCTF has been determined through review of the mission statement and any appropriate governing bylaws, administrative regulations or board governance policies.

The maximum size and definition of positions for each AAD/A organizational unit is defined by the Organizational Structure Committee (OSC) based on recommendations from the reporting Council.

The roles of a CCTF include chair, members, and ex-officio (voting members appointed by virtue of another position). The only time a member is a non-voting ex-officio member is if they are the president or secretary treasurer and they are not officially appointed to the entity. Other non-voting members are residents and board liaisons.

Mission Statements for Councils, Committees & Task Forces

Established Organizational Structure Committee (OSC) as the entity responsible for periodic review of all mission statements with each council and its reporting units, as well as the committees of the board to be reviewed once every five years with councils required to incorporate a review of their constituent units' mission statements as part of their annual reports to the board.

Established a rotation for periodic review of all component units of each Council during the OSC meeting scheduled during the Annual Meeting as follows:

- 2024 – Council on Science & Research
- 2025 – Council on Member Services
- 2026 – Council on Practice Management
- 2027 – Council on Government Affairs & Health Policy and Advisory Board
- 2028 – Board Committees & Council on Communications
- 2029 – Council on Community, Corporate and Philanthropic Relations
- 2030 – Council on Education

Committee Meetings/Time Commitment/Travel

Committees generally meet in-person at the Annual Meeting and at the AAD Innovation Academy Meeting (if the chair determines there is sufficient business to conduct). In addition, some committees meet during the year via conference call and/or conduct business by email.

- Free-standing meetings of councils/committees/workgroups are strongly discouraged.
- Every attempt should be made to tie a meeting to an existing scheduled meeting to reduce meeting attendance expenses. If a group cannot find an established meeting at which to meet, a separate meeting can be held (after explicit budget approval):
 - In the Chicago/Rosemont area to reduce staff travel expenses.
 - If Chicago is not the most economically feasible, at a town deemed most feasible after a cost/benefit analysis of projected travel and expense costs.

In general, committee meetings/calls are scheduled well in advance of the actual meeting/conference call date. Every attempt is made to accommodate the majority of members across multiple time zones. Care is taken to schedule conference calls to minimize time away from clinic and patients.

Terms of office begin at the conclusion of the Annual Meeting. Incoming committee members are invited to attend committee meetings held at the Annual Meeting as non-voting guest observers.



POSITION DESCRIPTIONS GOVERNANCE STRUCTURE

Role: *Chair*, voting member

Term: **Council Chair – 4-year term***
Committee Chair – 2-year term*
Task Force Chair – 2-year term*

*Cannot serve two consecutive terms Exceptions listed -BGP-
Appointments to Councils, Committees or Task Forces (CCTF)

*Cannot serve as a chair on more than one CCTF entity – Exceptions to
this rule:

Board of Directors – President

Executive Committee – President

Budget Committee – Secretary-Treasurer

Compensation Committee – Secretary-Treasurer

Appointment Selection Committee – President-elect

Leadership Development Steering Committee

Responsibilities: The chair will serve as a facilitator, to ensure that the business which comes to the council, committee or task force (CCTF) is dealt with appropriately. The chair guides the CCTF through the process of reaching consensus and enables the business to move through the CCTF structure. The chair is also responsible for making sure everyone feels comfortable participating in meetings, conference calls, and discussions by cultivating an atmosphere of respect among members. Chairs call for motions, they cannot make a motion.

- a. As needed – contact members non-compliant with the Academy's Disclosure of Outside Interests and Management of Conflicts of Interest, Code of Conduct, Confidentiality Agreement and Copyright Assignment of Work Product Policies to encourage them to complete the forms in order to be eligible to participate in the business of the governance entity.
- b. Groom and mentor, the deputy chair as part of the succession plan.

Role: *Deputy Chair*, voting member

The deputy chair is chosen from among the entity's outgoing or current members. In extenuating circumstances, a past member may be appointed to this role if there is a specific rationale for the appointment.

Position Descriptions – Governance Structure

Term:	Two-year term*; followed by two-year term as chair. *Exceptions listed BGP-Appointments to Councils, Committees or Task Forces (CCTF)
Responsibilities:	The responsibility of the deputy chair is to help retain institutional memory and assist the chair in serving as facilitator if necessary.
Role:	Member , voting member
Term:	3-year term* * Cannot serve two consecutive terms – Exceptions listed BGP- Appointments to Councils, Committees or Task Forces (CCTF)
Responsibilities:	Serves on a committee to fulfill its assigned mission.
Role:	Resident , non-voting member* *Except for members of the Residents/Fellows Committee
Term:	Consistent with resident/fellowship training. Terms may be one to three years depending on when appointed. Terms conclude at the close of Annual Meeting <i>following</i> end of individual's resident/fellowship training.
Notes	<p>Residents are not eligible to participate on the Executive Committee, Appointment Selection Committee, Audit Committee, Budget Committee, Bylaws Committee, Compensation Committee, Investments Committee, JAAD Publications Committee, Professionalism and Ethics Committee, Nominating Committee, Council on Community, Corporate & Philanthropic Relations, Corporate Relations Committee, Philanthropic Relations Committee, Scientific Assembly Committee, Resource-Based Relative Value Scale and Current Procedural Terminology Committee and Named Lectureship Task Force.</p> <p>The board has issued a guideline but not a binding policy, to limit the number of resident positions that can be appointed to a council, committee, or task force, in addition to the maximum number of members, to two.</p> <p>Unless otherwise specified in the Bylaws or in the Administrative Regulations, it is the prerogative of the Appointment Selection Committee to select residents as appointees to councils, committees and task forces.</p>

Note: Before a member can be considered for reappointment to the same CCTF entity, s/he must have been off the entity for a minimum of one year.

Position Descriptions – Governance Structure

Role: *Advisor Liaison*, non-voting member
The Advisor Liaison is a representative of a national dermatologic organization that has a federal lobbyist and/or dedicated advocacy staff employed within its organization. This Advisor Liaison will serve as the dermatologic organization’s representative on the Council on Government Affairs and Health Policy and participate in the Council’s monthly conference calls, in-person meetings held at the Academy Annual and Summer meetings and respond to emergent issues via email when needed. The Advisor Liaison is responsible for reporting back to his/her society on a regular basis. This position allows the Academy to work collaboratively with respective organizations to strengthen communications and develop cohesive lobbying efforts.

Term: This is a one-year renewable position.

Role: *Board Liaison*, non-voting member
Appointed to each Council, Residents/Fellows Committee and SkinPAC to report to the board the actions of that governance entity.

Term: Concurrent with board term.

Role: *Ex-officio*, appointed voting member
A member is ex-officio by virtue of another position s/he holds within the governance structure.

Term: This term is concurrent with his/her CCTF appointment term. (e.g., vice president is ex-officio voting member of the Membership Committee throughout his/her one-year term as vice president).

Role: *Ex-officio*, (president and secretary-treasurer standing; non-voting member)
Per the Bylaws, the president and secretary-treasurer serve as ex-officio, non-voting members of all standing councils, committees, task forces and ad hoc task forces. For appointments which are held by virtue of their positions, they are voting members. (e.g., president serves and has a vote on the Executive Committee).

Term: N/A

Position Descriptions – Governance Structure

Role: *Guest Observers*, non-voting member
Individuals wishing to attend a Board, or CCTF meeting may submit a request in writing, according to the Board of Directors, Council, Committee and Task Force Guest Observers Policy. The chair may invite anyone to attend as a guest observer except for the following: Appointment Selection Committee, Audit Committee, Budget Committee, Bylaws Committee, Compensation Committee, Corporate Relations Committee, Council on Community, Corporate & Philanthropic Relations, Philanthropic Relations Committee, Investments Committee, Named Lectureship Task Force, Nominating Committee, Professionalism and Ethics Committee, Scientific Assembly Committee and the Sulzberger Dermatologic Institute & Education Grants Committee.

Term: Only for the meeting which they are invited.

Role: *Staff Liaison*, non-voting
Serves as an informed resource to the chair and members of the committee. Assists the chair in facilitating committee discussions and activities which address the committee's charge. Works with the chair to ensure that all committee work is consistent with the association's goals and objectives.

Term: N/A

WHO DOES WHAT?

Role of the Chair (voting member)

Council Chair (4-year term)

Committee/Task Force Chair (2-year term)

Set Direction: Govern in a manner that is consistent with the AAD/A's stated shared values and the goals identified in its strategic plan. Establish policies that will affect the life and work of the organization and is accountable for the outcomes. Challenge yourself and the members to focus on solving the most strategically relevant tasks and issues for the betterment of the field of dermatology and the AAD/A.

Engage in Outreach: Understand the needs, wants and values of the Councils, Committees and Task Forces (CCTF). Encourage active participation by all members.

Serve as Facilitator: Keep members on track and focused, establish a quorum and ensure consensus is reached enabling business to continue to move through the governance structure.

Ensure Resources: Ensure effective organizational planning and adequate resources (Structure, time, members, staff, technology, etc.).

Plan for the Future: Mentor the deputy chair and entity members as part of a succession plan. Make recommendations during the application cycle for potential appointments.

Participate in a 30-minute call with the deputy chair and pertinent staff, 1 to 2 months prior to changing of the role of the deputy chair to chair providing expectations. Allow for open discussion providing advice and guidance on facilitating the calls/meetings.

Prepare: View the chair/deputy chair Orientation PowerPoint. Develop a plan that will allow the CCTF to effectively complete its responsibilities for the year, working with staff. Stay on schedule during your meetings/calls. Create an effective agenda and keep members on track during meetings/calls.

Compliance: Ensure all members are compliant with Disclosure of Outside Interests and Management of Conflicts of Interest, Code of Conduct, Confidentiality Agreement and Copyright Assignment of Work Product Policies and forms.

NOTE:

Committees reporting to the Council on Government Affairs and Health Policy (GAHP)

Chairs for each of the committees that report to the Council on GAHP serve in an ex-officio role on the Council.

Role of the Deputy Chair (voting member) (2-year term)

Engage in Outreach: Understand the needs, wants and values of the CCTFs. Encourage active participation by all members.

Serve as Facilitator: If chair is absent, stand in for the chair keeping members on track and focused, establish a quorum and ensure consensus is reached enabling business to continue to move through the governance structure.

Plan for the Future: Work with the chair mentoring as part of a succession plan. Make recommendations during the application cycle for potential appointments.

Participate in a 30-minute call with the chair and pertinent staff, 1 to 2 months prior to changing of the role of the deputy chair to chair. Chair and staff will provide expectations allowing for open discussion for advice and guidance on facilitating the calls/meetings.

Prepare: View the chair/deputy chair Orientation PowerPoint.

NOTE:

Committees reporting to the Council on Government Affairs and Health Policy (GAHP)

Deputy chairs of any of these committees whose chair's term will be ending at the following annual meeting should be invited to at least two meetings, before officially taking over as the chair to help transition into their ex-officio role on the Council. (One of the meetings being the annual meeting)

Role of the CCTF Member (voting member) (3-year term (generally))

Prepare: Review agenda and background materials for all calls/meetings.

Attend committee meetings and voice objective opinions. A quorum is necessary to conduct business at meetings/calls.

Work as part of the committee and staff team to ensure that the committee's work and recommendations are in keeping with the general association mission and goals.

Support the efforts of the committee chair and carry out individual assignments made by the chair.

Respond to all correspondence (emails/ballots, etc.) timely.

In order to maintain a high standard of professional conduct in the performance of the Academy business the Board of Directors and CCTF members must complete and maintain the Disclosure of Outside Interests and Management of Conflicts of Interest, Code of Conduct, Confidentiality Agreement and Copyright Assignment of Work Product Policies forms annually.

At any time during your appointment term should your business/personal commitments change, and you have difficulty fulfilling your CCTF appointment, please contact your chair and discuss your options. *Unless excused by the chair, a member with 50% or more unexcused absences for meetings/conference calls/email ballots within a one-year period will automatically be removed from their appointment term, after notification to leadership.*

Role of the Ex-officio Member (voting member) (terms vary – concurrent with their CCTF appointment term)

A member is ex-officio by virtue of another position s/he holds within the governance structure. This term is concurrent with CCTF appointment term which makes them an ex-officio member. Work as part of the committee and staff team to ensure that the committee's work and recommendations are in keeping with the general association mission and goals.

Role of the Ex-officio Member (non-voting member) (term concurrent with Board term) (President and Secretary-Treasurer)

Per the Bylaws, the president and secretary-treasurer serve as ex-officio, non-voting members of all standing CCTFs and AHTFs.

Role of the Board Liaison (non-voting member) (term concurrent with Board term)

Appointed to each Council, SkinPAC Board of Advisors and Residents/Fellows Committee to report to the board of directors on the actions of that entity.

Role of the Board Representative (voting member) (term concurrent with Board term)

Appointed to each standing board committee and Ad Hoc Task Force. This position is responsible for reporting out the recommendations to the board from the entity in which they serve as the board representatives. This not only ensures board member involvement within the governance structure; it also speaks to the AAD/A being fiscally responsible and not having to “send” a member to present recommendations at board meetings.

Role of the Resident Member (non-voting member) (Residents which serve on the Residents/Fellows Committee are voting members) (term varies (1-3-year term; term lasts until the ANM following end of member’s residency training)

Resident members represent the future of our field, and we hope that their early involvement in the Academy will foster a long-term desire to promote the interests of the AAD/A, and ultimately, their career and the health of their patients. Residents are non-voting members of the CCTFs, with the precise role of residents varying depending on the specific CCTF, but their participation is highly valued.

Role of Board Observer (non-voting member) (Residents/Fellows – 1 year; International – 2 years; Young Physician – 2 years)

Member representative from targeted member groups: International; Residents/Fellows, and Young Physicians.

Role of Guest Observers (non-voting member) (Only for the meeting in which they are invited)

Individuals wishing to attend a board or CCTF meeting may submit a request in writing, according to the Board of Directors, Council, Committee and Task Force Guest Observers Policy. The chair may invite anyone to attend as a guest observer, but again, guests are not allowed at all CCTF meetings.

Guests can only speak if the chair chooses to recognize them and “give them the floor.”

Role of Staff

- Informs and implements Board decisions
- A trusted partner with the Board, CCTFs, member leaders and members
- Provides organizational continuity
- Serves as liaison
- Implements programs and services offered to members

Ensure Resources: Provide a roster of the members of your CCTF including every member’s name, state, term date, position and if they are or are not a voting member in every agenda packet.

Include the Organizational Structure Chart in every agenda packet to remind the members where their committee sits within the full structure.

Include an action item log that includes a timeline with every summation report after each call/meeting. This action log is to be included with the agenda materials so the members can easily track the progress on projects in which their committee is involved.

Send approved summation reports from Council meetings to the members of the reporting entities to ensure there are clear lines of communication within each Council structure.

Prepare: Hold a 30-minute call prior to the first meeting of the year, with the chair and deputy chair to orient them on the processes and discuss the mission and include the AAD/A Organizational Structure Chart.

The first meeting of the year should include a 10-15-minute orientation for the new CCTF members on the governance structure, reporting process, mission and include the AAD/A Organizational Structure Chart.

Encourage all committees and task forces to have at least 2 meetings a year to increase engagement. If a committee or task force only holds 1 meeting a year, a 6-month video conference should be scheduled keeping members engaged.

REMINDER

Video Conferencing for AAD/A Council, Committee and Task Force Meetings

AAD/A Board of Directors approved policy that mandates video conferencing software be used as the default method of communication for all AAD/A Councils, Committees and Task Forces' meetings that take place outside of in-person meetings; and if audio-only conferencing must be used, then it is held over video conferencing software that includes participant tracking; and that audio-only participants in a meeting identify themselves when they join the meeting.



Responsibilities of Being a CCTF Member

1. Review agenda and background materials for all calls/meetings.
2. Attend committee meetings and voice objective opinions. A quorum is necessary to conduct business at meetings/calls.
3. Work as part of the committee and staff team to ensure that the committee's work and recommendations are in keeping with the general association mission and goals.
4. Support the efforts of the committee chair and carry out individual assignments made by the chair.
5. Respond to all correspondence (emails/ballots, etc.) timely.
6. To maintain a high standard of professional conduct in the performance of the Academy business the Board of Directors and CCTF members must complete and maintain the Disclosure of Outside Interests and Management of Conflicts of Interest, Code of Conduct, Confidentiality Agreement and Copyright Assignment of Work Product Policies forms annually.
7. At any time during your appointment term should your business/personal commitments change, and you have difficulty fulfilling your CCTF appointment, please contact your chair and discuss your options. Unless excused by the chair, a member with 50% or more unexcused absences for meetings/conference calls/email ballots within a one-year period will automatically be removed from their appointment term, after notification to leadership.

Fiduciary Responsibilities

Each Board Member also has fiduciary (trust) responsibilities: Duty of Care, Loyalty and Obedience.

- **The duty of care** means that you are required to exercise ordinary and responsible care in the performance of your duties, exhibiting honesty and good faith.
- **The duty of loyalty** requires you to pursue the best interests of the AAD/A rather than your own personal or financial interests or those of some other individual or entity.
- **The duty of obedience** requires you to act consistently with the AAD/A's mission and purposes and its articles of incorporation, bylaws, and other policies and procedures. It is the AAD/A's expectation that those serving within the governance structure agree to abide by the AAD/A's Code of Conduct and maintain a current disclosure of potential conflicts of interest.

 <p>DUTY OF CARE</p>	 <p>DUTY OF LOYALTY</p>	 <p>DUTY OF OBEDIENCE</p>
<p>Stewardship of financial assets and resources.</p>	<p>Acting in good faith; not allowing personal interest to prevail over the interests of the organization.</p>	<p>Comply with federal and state laws and bylaws.</p>

Each Board member, Chair and committee member also has a fiduciary (trust) duty to act prudently while serving and handling Academy resources.

The Board of Directors has a legal duty to act solely on behalf of and for the benefit of the Academy, not for the benefit of themselves, their employer, or their place of business. When the Board of Directors demonstrates each of these three duties it is effectively exercising accountability and its fiduciary responsibility.

Definitions of Governance Organizational Units

Board of Directors

The Board of Directors are responsible for two organizations: the American Academy of Dermatology (AAD) and the AAD Association (AADA). When both entities are referred to collectively, it is the AAD/A. The main purpose of the AAD is to provide members with educational resources. The main purpose of the AADA is to advocate on behalf of its members. The distinctions between the two organizations are based on the tax status of each organization. It is important that these entities operate as two separate organizations. Each board is responsible for managing the property and affairs of the entity of which it governs. The AAD Board of Directors consists of seven officers and 17 directors. The AAD Board of Directors serves as the AADA Board of Directors.

Executive Committee

The Executive Committee consists of the President, the President-Elect, the Vice President, the Vice President-Elect, the Secretary-Treasurer, Assistant Secretary-Treasurer and at least one other director designated by the Board of Directors and that shall include the Executive Director as a non-voting, ex-officio member. The role of the Executive Committee is to act on behalf of the Board of Directors between Board meetings.

Council

Council serves as oversight and coordinating group based on functions defined by the AAD/A as being pertinent to the organization's Mission Statement. Reports directly to the Board of Directors.

Committee

First level organizational entity that performs assigned tasks and directs and monitors the specific activities carried out by task forces. Reports directly to the overseeing council, unless it is a standing Board committee, then it reports directly to the Board of Directors.

Task Force

Second level organizational entity assigned very specific and defined tasks under the direction of appropriate committees and councils; whose scope is normally quite focused. Reports directly to overseeing committee.

Advisory Board

The Advisory Board is a committee of the AAD/A Board of Directors, and as such, operates under the auspices of the AAD/A Board of Directors in accordance with the AAD/A Bylaws and Administrative Regulations.

The mission of the Advisory Board is to protect, promote, and preserve the interests of the individual practitioner of dermatology by:

1. Providing a forum for AAD/A members to present policy proposals for consideration by the AAD/A Board of Directors; and
2. Serving as a conduit of information between the AAD/A Advisory Board, the represented societies and the AAD/A Board of Directors; and

3. Disseminating information on AAD/A policies and other issues vital to AAD/A members' patients and practices.

Ad Hoc Task Force (AHTF)

Issue-specific task forces with a mission that is not already being addressed somewhere within the standing governance structures are identified as "ad hoc task forces." If the topic is already being addressed within the current governance structure, the ad hoc task force should only be appointed if the identified entity's chair has confirmed that it has a full agenda and is unable to meet the required deadline.

These task forces are appointed by the President and should align with and advance the Academy's strategic goals. When ad hoc task forces are appointed, the appointment notification includes the mission, the deadline for receipt of the final report, and the reporting relationship (i.e., Board of Directors, Executive Committee, etc.).

Once the recommendations of the ad hoc task force have been reviewed and acted upon by the appropriate organizational unit, the ad hoc task force will be dissolved.

Workgroup

A workgroup is a subgroup of a council, committee, or task force (CCTF) or AHTF that is appointed by the chair of that entity to work on a particular project. Guidance on forming a workgroup can be found in the ***American Academy of Dermatology/Association (AAD/A) Workgroup Best Practice Document***.

Expert Resource Group (ERG)

Expert Resource Groups (ERGs) are made up of individuals who come together to share information and knowledge about a particular topic. They must apply to the AAD for ERG status and be approved by the Council on Science and Research, the Organizational Structure Committee, and the board of directors to become an ERG.

ERGs are not policy-making bodies and may not speak on behalf of the AAD. They are self-appointed, self-governing, and self-administered entities that are ancillary to the AAD. They determine its own mission statements, activities and take responsibility for securing resources independently to carry out those mission statements.

ERGs are expected to submit an annual report of its activities to the Council on Science and Research.

Automatic Appointments (Ex-Officio capacity)

President (Term – 1 year)

- Board of Directors (Chair)
- Budget Committee
- Compensation Committee
- Executive Committee (Chair)
- Scientific Assembly Committee
- Serves as Ex-Officio (non-voting) on all Councils, Committees, Task Forces & Ad Hoc Task Forces (except above where he/she is a voting member)

President-Elect (Term – 1 year)

- Appointment Selection Committee, (Chair)
- Board of Directors
- Budget Committee
- Compensation Committee
- Executive Committee
- Scientific Assembly Committee

Incoming President-Elect (Term – 1 year)

- Budget Committee
- Appointment Selection Committee

Immediate Past President (Term – 1 year)

- Academy Former Presidents Committee (Chair)
- Ad Hoc Task Force on Election Oversight (Chair)
- Board of Directors

Vice President (Term – 1 year)

- Advisory Board Leadership (BOD Liaison)
 - Executive Committee
 - General
 - Reference Committee
- Board of Directors
- Budget Committee
- Compensation Committee
- Executive Committee
- Membership Committee (per Bylaws)
- Chair, Ad Hoc Nominating Committee
- Member, WG – RRT – Rapid Response Team – Corporate

Vice President-Elect (Term – 1 year)

- Appointment Selection Committee
- Board of Directors
- Budget Committee
- Executive Committee
- Member, WG – RRT – Rapid Response Team – Corporate

Secretary-Treasurer (Term – 3 years)

- Audit Committee
- Budget Committee (Chair)
- Compensation Committee (Chair)
- Council on Community, Corporate and Philanthropic Relations
- Executive Committee
- Investments Committee
- Organizational Structure Committee
- Scientific Assembly Committee
- Appointment Selection Committee
- Serves as Ex-Officio (non-voting) on all Councils, Committees, Task Forces & Ad Hoc Task Forces (except above where he/she is a voting member)

Assistant Secretary-Treasurer (Term – 3 years)

- Audit Committee
- Budget Committee
- Compensation Committee
- Council on Community, Corporate and Philanthropic Relations
- Executive Committee
- Investments Committee
- Scientific Assembly Committee
- Appointment Selection Committee
- JAAD Publications Committee

Academy's Council on Medical Society Specialty (CMSS), Rep (Term – 4 years; renewable one additional term)

Advisory Board Chair (concurrent term – 4 years)

- Advisory Board Executive Committee, Chair
- Board of Directors
- Budget Committee
- Compensation Committee
- Council on Government Affairs and Health Policy
- Organizational Structure Committee

AMA Dermatology Section Council, Chair

(Term – 4 years; renewable 1-additional term)

- Council on Government Affairs and Health Policy

Council on Education, Chair

- Scientific Assembly Committee

Education and Volunteers Abroad Committee, Chair

- International Affairs Committee

Executive Committee-BOD Elected Representatives

- Budget Committee

International Board Observer

- Board of Directors (Observer)
- International Affairs Committee
- Membership Committee

International Affairs Committee, Chair

- Council on Member Services
- Scientific Assembly Committee

Public Education Committee

- Consultant, Representative from the Dermatology Nurses Association

Resident/Fellow Committee, Chair

- Board of Directors (Observer)
- Young Physicians Committee (Resident)
- Council on Member Services (Member)

SkinPAC Chair

- Council on Government Affairs and Health Policy

Young Physicians Committee Chair

- Board of Directors (Observer)
- Residents/Fellows Committee (Ex-Officio)
- Member, Council on Member Services

Parliamentary Order

Quorum – A quorum is the minimal number of **voting** members of a committee or organization who must be present for valid transaction of business.

- Declare a quorum, *50% plus one of the voting CCTF members*; once a quorum is established, it is maintained throughout the meeting/call as long as no one calls for another quorum.

Voting – as outlined in the Academy Bylaws.

- Edits to Bylaws and Administrative Regulations require 2/3 vote to pass.
- Board Governance Policies and Position Statements require a majority vote to pass.

Motions – The main purpose of a motion is to present an idea for consideration and action.

- A motion is proposed by a member of the body for the consideration of the body as a whole. The person making the motion, known as the mover, must first be recognized by the Chair as being entitled to speak; this is known as obtaining the floor. A Chair cannot make a motion but can ask for a motion to be made.

The Chair may say the following at the beginning of a meeting so everyone understands motions: "I would like to briefly outline the parliamentary flow of our meeting to keep it focused and on track. As we discuss the topics, I will call for a motion and then ask for a second. The motion cannot be discussed without a second. Seconding a motion merely indicates that the member wishes the motion to be considered by the CCTF and does not imply support for the motion. At the conclusion of the discussion, I will call for the vote." Below outlines the format for motions for your reference.

1. **Be recognized** – it is important that a member of an organization first have the floor before presenting a motion or new order of business. This is typically done simply the by the raise of a hand and recognition by the Chair.
2. **Motion is presented** – the appropriate language to use is, "I move that we..." Once a motion has been proposed, another member must second the motion for it to be considered by the committee.
3. **Motion is seconded** – The appropriate language to use is, "I second," or "I second the motion."
4. **Motion is discussed** – only motions that have been properly moved and seconded should be discussed.
5. **Vote is taken on motion** – after an appropriate period of discussion, the Chair should call for a vote for the motion on the floor. Voting can be conducted by voice vote ("aye" or "nay"), by raising of hands, by roll call or by ballot. Most votes can be determined by a simple voice vote or raising of hands.

Per the Administrative Regulation – Parliamentary Procedure –

1. All motions made in meetings of the Academy or Association Board of Directors, committees, councils, commissions, workgroups, and task forces shall require a second, provided that routine motions, such as approval of the minutes or adjournment, may be put to a vote without waiting for a second unless a member objects to the lack of second, in which case the chair will ask for one.

-
2. A motion may be withdrawn by the movant at any time up to the point where it is voted upon, including after it has been seconded. The movant may also accept friendly amendments, even after the motion has been seconded.

Workflow and Timeline

Meetings

Councils, committees, task forces generally meet in-person at the Annual Meeting and the Innovation Academy Meeting (if the Chair determines there is sufficient business to conduct). In addition, some committees meet during the year via conference call and/or conduct business by email. In general, meetings/calls are scheduled in advance of the actual meeting/conference call date. Every attempt should be made to accommodate most members across multiple time zones. Care is taken to schedule conference calls to minimize time away from clinic, patients, and family.

Terms of office begin at the conclusion of the Annual Meeting. Incoming members are invited to attend committee meetings held at the Annual Meeting as non-voting guest observers.

November/December:

Appointments Confirmed: Chair/Deputy Chair training video and the Governance Handbook provided. (<https://www.aad.org/member/membership/cctf>)

2 – 3 Weeks before Meeting:

Schedule Meeting: Staff liaison works with the Chair on selecting dates/times for meetings. Once the Chair agrees to several date/time combinations the staff liaison surveys the members to see the date/time that best fits to secure a quorum. Staff liaison sends a confirmation to members of the selected date/time by email and a calendar invitation.

Draft Agenda and Background Materials: Chair works with the staff liaison to create a well thought out agenda for the meeting. The staff liaison will do the research and gather the background materials for the meeting.

5 – 7 Days before Meeting:

Agenda Packet: Review and approve agenda and materials; once approved the staff liaison will send agenda and materials to the committee members.

3 – 5 Days before Meeting:

Expanded Agenda: Staff liaison provides the Chair with an expanded agenda (mirrors the agenda indicating where motions and votes are necessary and assists the chair in following parliamentary procedure). The expanded agenda should be used by staff liaisons to take notes during meetings and/or calls. Staff liaison to review the agenda and materials with the Chair at their request.

Meeting Day:

Emails:

- Send reminder email with agenda materials to committee members.
- Resend expanded agenda to Chair with agenda materials.

Be Prompt: It's beneficial for the Chair to connect a few minutes early for all calls/webinars or arrive early if an in-person meeting.

Communicate: Chair to keep communication open throughout the meeting allowing open discussion and maintaining control at the same time. Some members may be more reserved and need some coaxing from you as the Chair to participate, and on the other side, you may have to manage those who may be monopolizing the discussion. Ensure all members understand what is being discussed or voted on, many times it helps to summarize the outcome if the discussion was lengthy. Remember that you are the guide to the meeting, keeping it on track watching the time and working with the members on outcomes.

Reports: All governance reports must be in the form of a **Recommendation for Action (RFA)** or an **Information Report (IR)** that is submitted to its reporting Council, Committee or Task Force (CCTF); eventually to Board of Directors for approval. The staff liaison has access to these [templates](#) that outline what information is needed for submission.

End Meeting: When closing your meeting, provide a summary of the decisions made and action items along with next steps; including who may be responsible for specific actions. Discuss if a next call, webinar or meeting is necessary. Thank everyone for their time.

5 – 7 Days Post Meeting:

Summation Report: Staff liaison to provide the Chair the summation report for review and approval; once approved by the Chair the summation report is sent to the members with email ballot for approval.

Discussion Summary: Staff liaison to provide the Chair a discussion summary in cases when the meeting did not meet quorum.

After Summation Report Approved: Staff liaison will create a Recommendation for Action (RFA) or an Information Only (IO) and send it for approval.

Email Ballot – (as needed)

- Create email ballot.
- Create PDF of email ballot and supporting documentation with bookmarks.
- Send PDF to chair for review/approval.
- Once approved by Chair, finalize email ballot and materials, and send to CCTF members.
- Track all responses (always try to secure all members vote).
- Send results to CCTF.

Academy Former Presidents Committee

Reports to: Academy and Association Board of Directors

Mission Statement:

The committee is charged to interact with members and encourage their colleagues to get involved. That involvement could be on many levels, from AAD leadership (i.e., encouraging colleagues to run for office in the AAD; director and officer positions) to federal office positions to even participating at a more grass-roots level (state and local organizations).

Time Commitment: (Light)

Committee meets in conjunction with the Annual Meeting.

Composition:

Immediate Past-President serves as Chair
Former Academy Presidents who wish to participate.

Appointment Term:

Former Academy Presidents will always be eligible to be on this committee if they wish to participate.

Note:

- Exception to the one-appointment rule

Advisory Board

Reports to: Academy and Association Board of Directors ***Advisory Board Organizational and Operational Guidelines***

The Advisory Board is a committee of the AAD/A Board of Directors, and as such, operates under the auspices of the AAD/A Board of Directors in accordance with the AAD/A Bylaws, Administrative Regulations and Board Governance Policies.

Mission Statement:

The mission of the Advisory Board is to protect, promote, and preserve the interests of the individual practitioner of dermatology by:

1. Providing a forum for AAD/A members to present policy proposals for consideration by the AAD/A Board of Directors; and
2. Serving as a conduit of information between AAD/A Advisory Board, the represented societies, and the AAD/A Board of Directors; and
3. Disseminating information on AAD/A policies and other issues vital to AAD/A members' patients and practices.

Time Commitment: (Light to Moderate)

- Serve in this position for a minimum of two (2) years.
- Annually attend the two General Business meetings of the Advisory Board (in conjunction with the AAD Annual and Innovation Academy Meetings).
- Provide a 10-minute presentation to your membership at your society's annual meeting; and
- Facilitate a discussion of pending Advisory Board resolutions with members of your society prior to biannual Advisory Board business meetings.

In addition, this representative may be asked to assist other members of your organization in crafting thoughtful resolutions for submission or presenting resolutions on behalf of your organization. Ideally, this representative would either be a sitting member of your Board of Directors or have access to the Board to facilitate two-way communication between the Academy and your organization.

Composition:

The Advisory Board is comprised of one representative from each of its constituent societies as defined in Article VI, Section 8 of the [Academy Bylaws](#). Constituent societies will be members of the Advisory Board after they are determined to be bona fide dermatologic societies.

Bona Fide Dermatologic Society: The following definition was approved by the Board of Directors (7/01). A bona fide dermatologic society must:

- Be incorporated as a 501(c)3 or 501(c)6 not for profit organization with an individual physician membership that is national and/or international in scope;

Advisory Board (continued)

- Have a majority of its members who are certified or eligible to be certified by the American Board of Dermatology (ABD), the American Osteopathic Board of Dermatology, the Royal College of Physicians and Surgeons of Canada (Royal College) or a foreign board or its licensing equivalent or who satisfy educational and professional requirements of the ABD or the Royal College;
 - Provide, as its primary Mission Statement, continuing medical education for dermatologists, public education related to dermatologic concerns, professional development programs for dermatologists or support for research in dermatology; and
 - Derive its revenues principally from member dues and contributions, member service programs, annual meeting fees, or unrestricted educational grants from multiple commercial sources.
 - Further, a society may not have membership requirements beyond those for a Fellow member of the AAD, excepting pertinent geographic membership requirements.
2. They have been approved for membership by a majority vote of the Advisory Board Executive Committee.
 3. Constituent societies must be located within the United States, with the exception of the Canadian Dermatology Association. Constituent society representatives must be a member of the society that he or she represents as well as a member of the Academy and Association.

Appointment Term:

Not part of the appointment process

AB Chair also serves concurrent term on:

- *Board of Directors*
- *Organizational Structure Committee*
- *Budget Committee*
- *Council on Government Affairs and Health Policy*
- *Compensation Committee*

Note:

- Exception to the one-appointment rule

Advisory Board Executive Committee

Reports to: Academy and Association Board of Directors

Mission Statement:

It is the responsibility of the Advisory Board Executive Committee is to review annually the attendance records of the constituent societies and to initiate action against any nonparticipating constituent society. In addition, the Advisory Board Executive Committee shall determine the Advisory Board membership eligibility of all new and returning constituent societies.

Time Commitment: (Light to Moderate)

Monthly evening conference calls, in-person committee meetings held in conjunction with the Annual Meeting and AAD Innovation Academy. Encouraged to attend the Fall Legislative Conference

Composition: (7 elected voting members)

The Advisory Board Executive Committee shall be up to seven elected members from among the representatives of the constituent societies, as well as, the Advisory Board Chair, the Vice Chair and when applicable, the Chair-Elect and Vice Chair-Elect.:

- Advisory Board Chair
- Vice Chair
- Chair-Elect (serves one year prior to assuming role of Advisory Board Chair)
- Vice Chair-Elect (serves one year prior to assuming role of Advisory Board Vice Chair)
- AMA liaison
- Immediate Past Chair*
- Reference Committee Chair (*non-voting*) (*not included in count*)
- State Society Relationships Committee representative, (*non-voting*) (*not included in count*)
- Board of Directors Liaison (Vice President) (*non-voting*) (*not included in count*)
- Resident (*non-voting*) (*not included in count*)

Limitation on Multiple Roles

Except for the Advisory Board Chair and the Board of Directors Liaison, no person may concurrently serve as a director or officer of the AAD/A. Advisory Board officers may not serve as a constituent society representative. Officers of the Advisory Board are the Chair, Chair-Elect, Vice Chair and Vice Chair-Elect.

Representatives and Elections - Constituent Society Representatives

Each constituent society shall identify a representative to serve on the Advisory Board by whatever mechanism, and for whatever term, best suits that society's organization.

Advisory Board Executive Committee Members

The constituent societies representatives shall nominate and elect, by majority vote of the Advisory Board membership present and voting at its annual meeting, the seven members of the Advisory Board Executive Committee to serve staggered four-year terms.

Advisory Board Executive Committee (continued)

Advisory Board Chair and Vice Chair

The Advisory Board Chair and Vice Chair shall be elected by a majority vote of the Advisory Board membership present and voting at its annual meeting and shall serve concurrent four-year terms beginning at the adjournment of the meeting at which they are elected.

At the beginning of his or her third year in office, the Advisory Board Chair shall appoint a Selection Committee of three Advisory Board members. This Selection Committee shall select two candidates for Chair and two candidates for Vice Chair. The election will be held at the Annual Meeting of the Advisory Board at the beginning of the current Chair's fourth year in office. In accordance with *Based on American Institute of Parliamentarians; Standard Code of Parliamentary Procedure*, nominations may be made from the floor. Upon assuming office, the newly elected officer must relinquish his or her representative position, and the constituent society shall make a new appointment. The incumbent officers will serve for one year as Chair-Elect and Vice Chair-Elect.

Any vacancy in the office of Advisory Board Chair that may occur between regular elections shall be filled by the Advisory Board Vice Chair for the duration of the unexpired term. An election shall be held, using the procedure as stated in this section, by electronic means to fill the position of Advisory Board Vice Chair for the duration of the unexpired term.

As provided in the Academy and Association Bylaws, the Advisory Board Chair shall serve as an ex-officio member of the Academy and Association Board of Directors with full voting privileges.

No person may serve more than one full term as the Advisory Board Chair or Vice Chair.

Board of Directors Liaison

The Academy and Association Vice President shall serve as liaison to the Advisory Board and shall actively participate in the Advisory Board.

Reference Committee Members

The Advisory Board Reference Committee shall be made up of a Chair and four Advisory Board members appointed by the Advisory Board Chair to staggered terms of four years each. The Vice President of the Academy shall serve on the Reference Committee as ex-officio, non-voting member. The Chair of the Reference Committee and the four Reference Committee members shall have one vote each.

Appointment Term:

Automatic appointments - Concurrent with sitting appointment terms

- **Immediate Past Chair serves as ex-officio non-voting member of the Advisory Board Executive Committee for one year following his or her term as Advisory Board Chair*

Note:

Not part of the appointment process

Appointment Selection Committee

Reports to: Academy and Association Board of Directors

Mission Statement:

The Appointment Selection Committee, chaired by the President-Elect, solicits appointment recommendations from the Board members, Governance Chairs and Deputy Chairs, and Residency Program Directors, for vacancies on councils, committees, and task forces (CCTF) for the upcoming appointment cycle.

Time Commitment:

The Committee has one face-to-face meeting held in conjunction with the Fall Budget Committee meeting; six to eight hours to review appointment book prior to meeting; occasional email ballots.

Skill Set:

Ex-officio roles

Composition: Max #5

President-elect, Chair
Vice President-elect
Secretary-Treasurer
Assistant Secretary-Treasurer
Incoming President-elect

The Appointment Selection Committee:

- Selects deputy chair from sitting members or a member who has previously served on the CCTF or is knowledgeable, experienced or has a strong background in specific issues or areas.
- Deputy chair of committee/task forces is appointed for a 2-year term. This provides the deputy chair an opportunity to become more familiar with the issues of the committee. A determination will be made whether a deputy chair will ascend to chair when the current chair's term expires.
- Council deputy chairs are appointed two years prior to the council chair completing their term. A determination will be made whether a deputy chair will ascend to chair when the current chair's term expires.

Appointments to councils generally come as a result of committee service.

Appointment Selection Committee (continued)

Appointment Guidelines

The Appointment Selection Committee, chaired by the president-elect, is encouraged to appoint members who have attended the Leadership Forum, ADLP and/or Legislative Conference to available positions.

Adopted, as a non-binding guideline for the president-elect from year to year, “consensus of the executive committee” is that **former officers** should not receive first priority in consideration for appointment to councils, committees, and task forces in order to make leadership training opportunities available to the next generation of Academy leaders. Agreement that when these individuals have an expertise related to a specific topic, the chair of the body may be empowered to invite the former officer to serve as a guest observer to the group for a specified task.

Replacement Appointments

Replacement appointments are handled through the Appointment Selection Committee (ASC). When a vacancy occurs, the ASC will first review the current year’s unappointed member/resident spreadsheet to select the member(s) to fill the vacancy. In most cases, a backup or two will also be selected. Once the ASC has approved the replacements, the recommendations will be approved by the Executive Committee or the Board of Directors, based on timing.

Appointment Term:

Automatic appointments – Concurrent with officer term

Note:

- Residents not eligible to serve on this committee.
- Guest observers may not participate in meetings.

Audit Committee

Reports to: Academy and Association Board of Directors

Mission Statement:

The mission of the Audit Committee has a very substantial charge, which is reflected in the policy of the AAD. The work of the Audit Committee represents the final review activity associated with the Academy's annual financial results. The Committee conducts on behalf of the Board of Directors an in-depth review of the Academy's financial documents of the most recently ended fiscal year. These documents include those prepared by the Academy's independent auditors and staff. The Committee assures the Board of Directors and the membership that the funds of the Academy are being prudently managed and that expenditures were consistent with the purposes and levels intended at the time that the financial plan (budget) for the fiscal year was prepared and approved by the Board.

Time Commitment: (Light – Focus on Spring timeframe)

One in-person meeting typically held in conjunction with the Spring Board Meeting. Members are required to review agenda and materials prior to this meeting. There is one additional short evening conference call, usually in February.

Skill Set:

Members should have the following attributes:

- an understanding of financial statements and generally accepted accounting principles,
- an ability to assess the general application of such principles in connection with the accounting for estimates, accruals, and reserves,
- understanding of internal controls and procedures for financial reporting; and
- an understanding of audit committee functions.

A member can acquire such attributes through their education and experience with running their own practices and/or serving on relevant/similar boards or committees. Experience actively supervising an office manager/bookkeeping personnel or person performing similar functions (or experience overseeing or assessing the performance of companies or public accountants with respect to the preparation, auditing, or evaluation of financial statements) is important.

Composition: Max #9

1 Chair

1 Deputy Chair

5 At-large Members

2 Ex-officio Members (*voting*)

- Secretary-Treasurer
- Assistant Secretary-Treasurer

Appointment Term:

Chair – three-year term; Deputy Chair – three-year term; Members – three-year term

- Exception to the one-appointment rule

Note: Residents are not eligible to serve on this committee/Guest observers may not participate in meetings.

Budget Committee

Reports to: Academy and Association Board of Directors

Mission Statement:

The Budget Committee will review the proposed budgets of the American Academy of Dermatology and AAD Association and present recommendations to the Board of Directors. The Committee will also make recommendations during the fiscal year on financial resources that are necessary to carry out the Academy's priorities/activities.

Time Commitment: (Moderate – focus on fall timeframe)

Fall in-person meeting where there is a significant number of materials to review and approve prior to the committee meeting. If necessary, a Spring meeting will be held in conjunction with the spring Board Meeting.

Skill Set:

As a member of the Board of Directors, this committee will have a fiduciary responsibility to be good stewards of the Academy's finances.

Composition: Max #10 and Chief Executive Officer

Secretary-Treasurer, Chair

President

President-Elect

Vice President

Vice President-Elect

Assistant Secretary/Treasurer

Incoming President Elect

Advisory Board Chair

2 at-large members from the Executive Committee

Executive Director - Ex-officio member (*non-voting*) (*not included in count*)

Appointment Term:

Automatic appointments - Concurrent with sitting appointment terms

- *Same composition as the Executive Committee with addition of Advisory Board Chair and Incoming President-Elect. The Secretary-Treasurer serves as Chair.*

Note:

Not part of appointment process

- Residents not eligible to serve on this committee.
- Guest observers may not participate in meetings.

Bylaws Committee

Reports to: Academy and Association Board of Directors

Mission Statement:

In accordance with guidelines set forth in the Academy and Association's administrative regulations, the Bylaws Committee shall review, analyze, and suggest revisions as it may deem necessary and appropriate to all proposed amendments to the Academy and Association's Bylaws or Articles of Incorporation that may originate either with the Board of Directors or by petition of qualified members.

Time Commitment: (Light)

Committee meets in conjunction with the Annual Meeting and/or AAD Innovation Academy **only** if Bylaws Amendments are being revised. Members may be asked to participate in evening conference calls, to review, make recommendations, and approve written materials.

Skill Set:

Committee members should have an interest in making long term improvements/impact on Academy operations. Appreciation for and attention to the detail of processes, procedures and Academy history is especially important. Significant Academy experience is not required but suggested. Ideal candidates should be able to review, analyze and suggest revisions to proposed amendments, be dedicated to patient care and able to see big picture. Must be computer literate and able to accept attachments and view redlined documents.

Composition: Max #9

- 1 Chair
- 1 Deputy Chair
- 5 At-large Members
- 1 Young Physician Member
- 1 Ex-officio Member (*voting*)
 - Board of Director (BOD Rep)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term

Note:

- Residents are not eligible to serve on this committee.
- Guest observers may not participate in meetings.

Compensation Committee

Reports to: Academy and Association Board of Directors

Mission Statement:

The Committee would be charged with:

- reviewing and evaluating the compensation package of the Academy's CEO & Executive Director;
- overseeing and approving CEO & Executive Director benefits and perquisites;
- meeting annually to review executive compensation and benefits to ensure consistency with the marketplace and compliance with IRS standards; and
- making compensation, perquisites, and benefit recommendations to the Board of Directors for approval.

Time Commitment: (Light)

Members are expected to attend one in-person committee meeting in conjunction with the Annual Meeting and participate in 2-3 evening conference calls.

Skill Set:

Ex-officio roles

Composition: Max #6

Secretary-Treasurer, Chair

President

President-Elect

Vice President

Assistant Secretary-Treasurer

Advisory Board Chair

Appointment Term:

Automatic appointments - Concurrent with sitting appointment terms

Note:

- Residents not eligible to serve on this committee.
- Guest observers may not participate in meetings.

DataDerm Oversight Committee

Reports to: Academy and Association Board of Directors

Mission Statement:

The mission of the DataDerm Oversight Committee is to oversee all aspects of DataDerm, including oversight of DataDerm contractors, participating support, performance measure reporting and dashboards, and data governance - including data collection, use, analysis, reporting and monetization.

Time Commitment: (Moderate)

- one to two in-person meetings annually
- two teleconferences per quarter

Skill Set:

- Experience with health informatics and/or data science
- Interest in or expertise in coding and/or reimbursement
- Interest in or expertise in quality improvement and performance measurement
- Interest in augmented intelligence (AI)
- Interest in data analysis and/or health services research

Composition: Max #12

1 Chair

1 Deputy Chair

2 At-large members

7 Ex-officio Members (*voting*)

- Chair or Designee of the Performance Measurement Committee
- Chair or Designee of the Patient Safety and Quality Committee
- Chair or Designee of the Council on Government Affairs and Health Policy
- Chair or Designee of the Council on Practice Management
- Chair or Designee of the Council on Science & Research
- Chair, Data Governance Task Force
- Chair, Data Standardization Task Force

1 Ex-officio Member (*voting*)

- Board of Director (BOD Rep)

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – three-year term; Deputy Chair – three-year term; Member – three-year term

Data Governance Task Force

Reports to: DataDerm Oversight Committee

Mission Statement:

The mission of the Data Governance Task Force is to oversee DataDerm's data analytics area, which includes the overall management of the data, development of data reports, and implementation of established policies and processes for data access, dissemination and use by various stakeholder groups. The Data Governance Task Force makes recommendations to the DataDerm Oversight Committee on these topics.

Time Commitment: (Moderate)

- one to two in-person meetings annually
- two teleconferences per quarter

Skill Set:

- Experience with health informatics and/or data science
- Interest in or expertise in coding and/or reimbursement
- Interest in data analysis and/or health services research
- Interest or expertise in data governance and compliance
- Interest or expertise in statistical analysis

Composition: Max #7

1 Chair

1 Deputy Chair

5 At-large members

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term

Note:

- Chair serves as an Ex-officio member of DataDerm Oversight Committee

Data Standardization Task Force

Reports to: DataDerm Oversight Committee

Mission Statement:

The mission of the Data Standardization Task Force is to be in collaboration with electronic health record vendors, the Data Standardization Task Force is charged with developing mechanisms to guide AAD members in more effective and standardized documentation, structured data collection, and data completeness.

Time Commitment: (Light)

- one in-person meeting/Academy's Annual Meeting
- two-three teleconferences annually

Skill Set:

- Experience with health informatics and/or data science
- Interest in or expertise in coding and/or reimbursement
- Interest in data analysis and/or health services research
- Interest or expertise in data governance and compliance
- Expertise in Electronic Health Records and/or Health IT

Composition: Max #7

1 Chair

1 Deputy Chair

5 At-large members

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term

Note:

- Chair serves as an Ex-officio member of DataDerm Oversight Committee

Executive Committee

Reports to: Academy and Association Board of Directors

Mission Statement:

The Executive Committee is responsible for the management of the Academy when the Board of Directors is not in session. In particular, the Executive Committee shall be responsible for supervising and directing the activities of all councils and committees, including performing the specific supervisory functions described in the Administrative Regulations relating to councils and committees.

Time Commitment: (Light to Moderate)

- 8 monthly calls approximately one hour held during months the Board of Directors does not meet (2nd Thursday of the month)
- Miscellaneous email ballots throughout the year

Composition: 8 members and Chief Executive Officer

President, Chair

President-Elect

Vice President

Vice President-Elect

Secretary/Treasurer

Assistant Secretary/Treasurer

2 Board members elected-at-large*

Ex-officio member (*non-voting*) (*not included in count*)

- Executive Director

Note:

- *Each year the Secretary/Treasurer polls the members of the “sophomore” class of the Board of Directors to determine their interest in running for a seat on the Executive Committee. Once the slate has been established the Board then votes to elect the new Executive Committee member. All members serve concurrent terms on the Budget Committee.
- Residents are not eligible to serve on this committee.
- Guest observers may not participate in meetings.

Investments Committee

Reports to: Academy and Association Board of Directors

Mission Statement:

The Investments Committee reviews Academy investment practices so as to achieve maximum return with greatest security of all funds.

Time Commitment: (Light)

- One in-person committee meeting in conjunction with the Annual Meeting; members are required to review and approve written materials,
- Members may also be asked to participate in evening conference calls, and
- Quarterly updates will be provided to the committee.

Skill Set:

The Investments Committee is responsible for overseeing the investment of assets, investment-related liabilities and management of investment policies and performance against established investment return benchmarks. Members should have the following attributes:

- understanding of financial statements and investment vehicles/investment funds,
- ability to assess performance of individual investments and/or investment funds,
- understanding of general investment policies; including asset/portfolio rebalancing concepts; and
- ability to review and update the Academy's risk tolerance level as it relates to changing market conditions and evolving liquidity needs of the Academy and its members, partners, and long-term strategic objectives.

No member of the Investment Committee shall have a relationship that may interfere with his/her independence from management and the Academy or with the exercise of duties as a Committee member. A member can acquire such attributes through their education and experience with running their own practices and/or serving on relevant/similar boards or committees.

Composition: Max #9

Chair

1 Deputy Chair (*appointed 2 years prior to Chair term concluding*)

6 At-large Members (*in year of Deputy Chair – 5 at large members*)

2 Ex-officio members (*voting*)

- Secretary-Treasurer
- Assistant Secretary-Treasurer

Appointment Term:

Five-year term

Note:

- Residents not eligible to serve on this committee.
- Guest observers may not participate in meetings.

JAAD Publications Committee

Reports to: Academy Board of Directors

Mission:

The mission of the JAAD Publications Committee is to review issues of vital interest between the JAAD Editor-in-Chief (EIC), representing the editorial interests of the JAAD Journals, and the Board of Directors, representing the interests (financial and otherwise) of the American Academy of Dermatology (AAD). Act as a communications conduit/channel between the society and journal to ensure editorial independence and ethical conduct of all parties, and to avoid actual or the appearance of undue outside influence on journal editorial decisions.

The JPC serves as an advisory (only) committee to the leadership of the society and to the editors of all JAAD publications; and has no decision-making authority over the publication of manuscripts.

The JAAD Publications Committee will perform the following important functions:

- Evaluate and assess journal concerns identified by JAAD Editor/s or AAD Board.
- Review and advise the Editor/s and Board on necessary actions to ensure the editorial integrity of the journal.
- Provide expertise on scientific and publications policies, as well as legal and ethical considerations.
- Advise on cross-journal policies.

Time Commitment: (Moderate)

- Meet quarterly on Journal business.
- Meet periodically as issues arise.
- Conduct email ballots throughout the year.

Skill Set/Qualifications:

- Experience in various aspects of scholarly journal publishing, whether as a member of an editorial board, reviewer, author, or publisher; or in a society governance role.
- Experience serving within the AAD governance structure and familiarity with society governance policies and procedures.
- Able to review and provide recommendations to resolve issues quickly and maintain confidentiality.
- Demonstrate professionalism, ethical conduct, and sound business judgment.
- Respected member of the dermatologic community.
- Cannot serve concurrently as the leader of a dermatologic journal or society considered competitive with JAAD and AAD.

JAAD Publications Committee (continued)

Member Composition:

9 members (5 voting and 4 non-voting)

Voting positions:

- Chair: former editor, deputy editor or associate editor of *JAAD*, *JAAD Case Reports*, *JAAD International* or other *JAAD OR AAD (Dermatology World)* publication not concurrently serving on the AAD Board or in a competing journal's editorial leadership
- 1 Ethics Expert: Chair, Professionalism and Ethics Committee
- 2 At-large members with publications experience
- 1 At-large young physician member, preferably has successfully completed a mentee role in the *JAAD* Editorial Mentorship Program

Non-voting positions:

- Current *JAAD* Editor-in-Chief
- 1 Ombudsman; the AAD Assistant Secretary-Treasurer as a divested officer with knowledge of the Board and of *JAAD*; Reports to the Board on Committee actions.
- 1 Publishing industry representative¹
- 1 Medical Journal Editor with experience in a field outside of dermatology²

Terms:

- Chair will serve 3-year terms, with one consecutive reappointment possible
- Ex-officio roles will serve concurrent terms.
- All other roles will serve 3-year terms.

Notes:

- Residents are not eligible to serve on the committee.
- No member, except for the *JAAD* Editor-in-Chief, should be a member of the *JAAD* Editorial Board.
- No member, except for the Assistant Secretary Treasurer, should be a member of the AAD Board.
- Guest observers or advisors may not participate in meetings.

¹ Minimum of 10 years' experience as a Publisher in the scholarly publishing field for a society self-published journal or commercial publishing company; selected by the Chair and confirmed by the Appointment Selection Committee and the Board of Directors. One consecutive reappointment possible.

² Minimum of 5 years' experience as an Editor in Chief of a scholarly medical journal; selected by the Chair and confirmed by the Appointment Selection Committee and the Board of Directors. One consecutive reappointment possible.

Leadership Development Steering Committee

Reports to: Academy and Association Board of Directors

Mission Statement:

The mission of the Leadership Development Steering Committee is to develop leadership skills in dermatologists, preparing and motivating them to serve effectively in:

- organized medicine.
- policy making, advocacy and practice management; and
- their careers.

Time Commitment: (Moderate)

Committee meets in conjunction with the Annual Meeting and AAD Innovation Academy. Attendance at the annual Leadership Forum strongly encouraged. Evening conference calls quarterly, or as needed.

Committee provides updates for each Board of Directors meeting on the development of sessions for the Annual Meeting and AAD Innovation Academy, Leadership Forum, and the Academic Development Leadership Program.

Skill Set:

Members should have proven leadership skills and participated in one or more of the following Academy's Leadership Development Steering Committee's (LDSC) leadership programs:

- Leadership Forum
- Leadership Forum – 201
- Mastery CCL
- Academic Development Leadership Program

LDSC members may be asked to serve on LDSC workgroups or aid in LDSC design of course development. Current workgroups include (but are not limited to):

- WG – Leadership Forum,
- WG – Academic Development Leadership Program; and
- WG – Mentoring that report to LDSC.

Additionally, there are courses created with consultants and presented at Annual Meeting and AAD Innovation Academy. Current LDSC members are asked to help with sessions; however, on occasion another member maybe invited to participate.

The LDSC also manages the work of the Leadership Institute which includes:

- developing and accessing outcomes measures,
- developing an overall leadership curriculum framework and specific sessions,
- teaching some Leadership Institute sessions at Annual Meeting and/or AAD Innovation Academy; and
- overseeing the work of five workgroups that develop specific projects.

Leadership Development Steering Committee (continued)

Composition: Max #11

1 Chair

1 Deputy Chair

8 At-large Members

1 Ex-officio Member (*voting*)

- Board of Director (BOD Rep)

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – three-year term; Deputy Chair – three-year term; Member – three-year term;

Resident term concurrent with residency

Leadership Advisory Board

Reports to: Leadership Development Steering Committee

Mission Statement:

Provide broad perspective on leadership initiatives, needs and ideas to both the Leadership Development Steering Committee and its workgroups. Members will serve as the liaisons between their respective organizations and the Leadership Steering Committee and Institute activities.

Time Commitment:

Includes in-person meetings in conjunction with the Annual Meeting and AAD Innovation Academy, and evening conference calls as needed. Should provide advice and insight as to the overall direction of leadership development for dermatologists. Terms depend on the term that the representative serves on the entity for which he/she is appointed but should be 2-4 years.

Skill Set:

Leadership Advisory Board members are appointed by the stakeholder groups, which currently include the Intersociety Liaison Committee societies. The Leadership Advisory Board serves to provide broad perspective on leadership initiatives, needs and ideas to both the Steering Committee and workgroups. In addition, members will serve as liaison between their organization and the leadership initiative.

Composition:

Representatives of the following sister societies:

American Academy of Dermatology

American College of Mohs Surgery

American Contact Dermatitis Society

American Dermatological Association

American Society for Dermatologic Surgery

American Society for Dermatopathology

American Society for Mohs Surgery

Association of Military Dermatologists

Association of Professors of Dermatology

Council for Nail Disorders

Medical Dermatology Society

Noah Worcester Dermatological Society

North American Hair Research Society

Photomedicine Society

Society for Investigative Dermatology

Society for Pediatric Dermatology

United States Cutaneous Lymphoma Consortium

Women's Dermatologic Society

Appointment Term:

Automatic appointments - Concurrent with sitting appointment terms

Nominating Committee

Reporting to: Academy Board of Directors

Mission Statement:

The Nominating Committee shall screen and evaluate all nominees and select a definitive slate of highly qualified candidates for President-Elect, Vice President-Elect, Board of Directors and Nominating Committee member representative based on professional, scholarly and administrative skills, as well as geographic representation. The Nominating Committee recognizes that diversity¹ is a core value of the Academy.

Time Commitment: (Heavy from Fall through Spring election cycle)

- Review and complete on-line nominee grids approximately 4 weeks prior to the in-person meeting,
- One in-person meeting approximately 7 weeks prior to the Annual Meeting,
- One conference call approximately 3 weeks prior to the Annual Meeting,
- Other evening conference calls as needed throughout the nomination/election cycle.

Skill Set:

The Nominating Committee member requirements are established in the governing bylaws and administrative regulations and policies of the Academy. Members should have these suggested attributes:

- extensive knowledge of the working/operational structure, history, and traditions of the Academy and how a potential candidate for office has interacted with Academy staff over the years.
- experienced enough with the Academy to understand the degrees of responsibility different positions have, i.e., being chair of SAC is more important than being chair of a task force, etc.
- open, honest, impartial and have no significant conflicts of interest, resist politicization of the nomination process and should be forceful enough to speak up, but not so forceful as to try to exert undue influence over the nominations process, able to understand and follow the rules and requirements of the nominations process under the Academy's bylaws and administrative regulations.
- very experienced and currently active in Academy activities be energetic and willing to give the amount of time required for the nominations process and understand that he or she may be called upon to perform activities at unusual times in possibly inconvenient locations.
- flexible and willing to look at the nominations process and offer suggestions as to how to improve it and not be rigid and unduly committed to the status quo.
- willing to accept feedback and be "tough skinned" when and if the Nominating Committee's decisions are questioned in good faith by Academy members.
- broad knowledge of members from many dermatology specialty areas (i.e., medical, surgical, dermpath, pediatrics, and the academic and clinical sectors), and
- not currently serving on a nominating committee of another major dermatology organization

Nominating Committee (continued)

Additional suggested characteristics for the Board of Directors, Advisory Board and Nominating Committee to consider when selecting nominees to serve on the Nominating Committee are outlined in the Nominee Criteria Nominating Committee Standard Operating Procedure.

Composition²: Max #7

- 1 Chair
- 2 Members appointed by the Board of Directors
- 2 Members appointed by the Advisory Board
- 2 Members elected by the general membership

The Board of Directors' appointee is selected by the Ad Hoc Nominating Committee appointed by the President. The Board of Directors' appointee must come from the geographic region being vacated by the Advisory Board appointee.

The Advisory Board appointee must come from the geographic region being vacated by the Board of Directors' appointee.

The member representative rotates between East and West representation.

The separate Administrative Regulations (AR) and Board Governance Policy (BGP) that cover the composition and activities of the Nominating Committee are:

- AR on Nominating Committee – Regional Rotations for the Board of Directors & Advisory Board Representatives
- BGP on Restrictions on Nomination and Election Entities
- AR Nomination and Election Procedures

Appointment Terms:

1-year term	Chair ³
2-year term	Members
1-year automatic term	Former President ⁴

Note: Not part of the appointment process ***Nominating Committee (continued)***

- Residents are not eligible to serve on the committee.
- Guest observers may not participate in meetings. No incumbent member of the Board of Directors may serve on the Nominating Committee.

³ At the conclusion of each election cycle, the Nominating Committee elects one (1) member who has completed two (2) election cycles on the Committee to serve as Chair of the Committee for the next election cycle. (AAD Bylaws Article VI Board of Directors – Section 3 a.)

⁴ The former president serves an automatic one-year, non-voting appointment on the Nominating Committee upon completion of his/her appointment on the Ad Hoc Task Force on Election Oversight. No other former president shall, through election or appointment, serve on the Nominating Committee.

Organizational Structure Committee

Reports to: Academy and Association Board of Directors

Mission Statement:

The mission of the Organizational Structure Committee is to survey and update on a continuing basis the council, committee, and task force structure. The Committee makes recommendations to the Board of Directors for any changes to the organization.

Time Commitment: (Light to Moderate)

Committee usually meets in conjunction with the Annual Meeting and/or AAD Innovation Academy. Members may need to participate on 3-4 evening conference calls and/or email ballots throughout the year.

Skill Set:

An individual with a broad understanding of the Academy's governance structure and strategic framework. Ideally, interested members should have previous experience or understanding of the governance structure. Activities include making decisions on council/committee/task force (CCTF) mission statements, composition, policies, definitions, and reporting structure.

Composition: Max #11

1 Chair

1 Deputy Chair

7 At-large members

2 Ex-officio Members (*voting*)

- Secretary Treasurer
- Advisory Board Chair

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member– three-year term; Resident-concurrent with residency

Professionalism and Ethics Committee

Reports to: Academy Board of Directors

Mission Statement:

The mission of the Professionalism and Ethics Committee is to prepare, maintain and disseminate guidelines for a code of professional conduct and ethical principles for dermatologists. The Committee also develops regulations and administrative procedures regarding adherence to the code by Academy members. It reviews complaints or charges alleging violation of these guidelines by members or staff of the Academy. Finally, the Committee develops and disseminates educational content related to ethics and professionalism in dermatology to members of the Academy.

Time Commitment: (Light to Moderate)

Based on issues, Committee usually meets at Annual Meeting. Throughout the year members may be asked to review, make recommendations, or approve written materials by either evening conference call or email ballot.

Skill Set:

An active member in good standing in either private or academic practice with significant experience in the Academy, dermatology society, community, and other professional activities. Leadership should seek to maintain diversity (age, gender, practice type and race) of the Committee if such consideration does not diminish the quality and experience of the Committee. Fast turn-around of committee issues with little advance notice is occasionally required. Must be computer literate and able to accept attachments and view redlined documents. Members must agree to full and complete disclosure consistent with Academy requirements and understand the need for complete confidentiality.

Composition: Max #11

1 Chair

1 Deputy Chair

8 At-large Members

1 Ex-officio Member (*voting*)

- Board of Director (BOD Rep)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term

Note:

- Chair and Deputy Chair each draft two “Question of the Week” for committee approval via email ballot
- Residents are not eligible to serve on this committee
- Guest observers may not participate in meetings

SkinPAC Board of Advisors (Board)

Reports to: Association Board of Directors

Mission Statement:

The American Academy of Dermatology Association Political Action Committee (SkinPAC) is a non-partisan voluntary, non-profit, unincorporated association operating as a separate, segregated fund of the American Academy of Dermatology Association. It is the intent of SkinPAC to help the AADA achieve its legislative goals by supporting the election or reelection of candidates to Congress who share the AADA's commitment to the specialty of dermatology. To further these purposes, SkinPAC is empowered to solicit directly or indirectly, accept voluntary personal contributions, and to make expenditures in connection with the election of candidates to federal office.

Time Commitment: (Moderate - Extensive)

The SkinPAC Board of Advisors meets in-person one to two times per year, typically at the Annual Meeting and in the summer the Innovation Academy meeting. In addition to this meeting, The SkinPAC Board typically holds 3-4 conference calls per year. Additional business is conducted via email as needed. SkinPAC Board members are also expected to engage in fundraising activities and encouraged to attend other dermatologic meetings and political events on behalf of SkinPAC.

Skill Set:

SkinPAC is the specialty's only federal political action committee. Members of the SkinPAC Board of Advisors (Board) should have an interest in the electoral process at the federal level and should be committed to advancing the AADA's advocacy priorities. Board member duties include fundraising for SkinPAC contributions from fellow dermatologists at dermatologic meetings and within their personal network; political education of AADA members about the importance of SkinPAC and its role in federal election process, and importance to AADA Advocacy; representing SkinPAC at AADA and other dermatologic meetings throughout the year. A record of SkinPAC support is strongly encouraged. Fundraising experience is also very helpful.

Resident Skill Set:

In addition to participating in Board meetings, the resident will help build a culture of giving among the Association membership from the earliest days in Association members' careers. As a part of this effort, the resident member would encourage other residents to begin supporting SkinPAC's efforts—if even at small and nominal amounts—with a greater goal of building a culture that will produce and encourage future SkinPAC supporters. Support of SkinPAC including a nominal amount, is strongly encouraged.

Platinum	\$5,000
Gold	\$2,500-\$4,999
Silver	\$1,000-\$2,499
Bronze	\$500-\$999
Member	\$250-\$499
Resident	\$25 (benefits with \$100)

SkinPAC Board of Advisors (Board) continued

Composition: Max #11

- 1 Chair
- 1 Vice Chair
- 9 At-large Members
- 1 Ex-officio Member (*non-voting*) (*not included in count*)
 - Board of Director (BOD Liaison)
- 2 Residents (*non-voting - not included in count*)

Appointment Term:

- Chair - two-year term coincides with the two-year federal election cycle (i.e., beginning on January 1 of the federal election cycle and concluding on December 31 of the election year)
- Chair serves as a member of the Council on Government Affairs and Health Policy
- Vice Chair two-year term coincides with the two-year federal election cycle.
- **At-Large member - three-year term and may serve one additional term**
- Resident-concurrent with residency

Note:

- Terms run January– December (Nominations presented at November Board Meeting)
- Exception to the one-appointment rule
- Members serving on SkinPAC should not serve concurrently on the Philanthropic Relations Committee

State Society Relationships Committee

Reports to: Academy and Association Board of Directors

Mission Statement:

The mission of the State Society Relationships Committee is to develop, expand and enrich Academy relations with state societies and their leaders to increase our cooperative work toward common goals and development/support of state initiatives.

Time Commitment: (Moderate)

Committee meets in conjunction with the Annual Meeting and AAD Innovation Academy. Evening conference calls quarterly, or as needed. Additional conference calls may be necessary for workgroups or committee members working with on specific programs. Committee provides updates for each Board of Directors meeting on the programs, tools and resources developed for state societies. Committee oversees the State Society Leadership Conference program and plans meetings and leadership retreats with select state societies. Some committee members will need to travel. Attendance at the Leadership Summit is encouraged.

Skill Set:

Members should have a strong interest in ensuring that dermatology state societies are strong, with engaged members. Current or past involvement within a state society is highly recommended.

Composition: Max #11

1 Chair

1 Deputy Chair

5 At large Members

3 Ex-officio Members (*voting*)

- Chair, State Policy Committee
- Chair, Patient Advocate Task Force
- Board of Director (BOD Rep)

1 Ex-officio Member (*non-voting*)

- Chair, Advisory Board Executive Committee, or designee

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency

- *Chair, State Society Relationships Committee, or his/her designated member from that Committee shall serve on the Advisory Board Executive Committee as a non-voting member.*

Patient Advocate Task Force

Reports to: State Society Relationships Committee

Mission Statement:

The mission of the Patient Advocate Task Force is to be responsible for serving as a point of coordination on educational, legislative, and research issues of shared concern between patients, patient advocacy groups and the AAD and AADA that support our shared goal of promoting, advancing, and sustaining the highest medical care for all patients with dermatologic disorders.

Time Commitment: (Light to Moderate)

Task Force meets in conjunction with the Annual Meeting and may have periodic conference calls, as necessary. Task force members are strongly encouraged to attend the AADA Legislative Conference in Washington, DC.

Skill Set:

Members should have a strong interest in patient advocacy and in working with patient groups. Task force members work with the Coalition of Skin Diseases on several projects and programs.

Composition: Max #11

1 Chair

1 Deputy Chair

9 At-large Members

2 Residents (*non-voting*) (*not included in count*)

1 Coalition of Skin Diseases (CSD) Advisor (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency; Advisor – 1-year term (can be reappointed)

- *Chair serves concurrent term on the Council on Science & Research*

Patient Advocate Task Force

Reports to: State Society Relationships Committee

Mission Statement:

The mission of the Patient Advocate Task Force is to be responsible for serving as a point of coordination on educational, legislative, and research issues of shared concern between patients, patient advocacy groups and the AAD and AADA that support our shared goal of promoting, advancing, and sustaining the highest medical care for all patients with dermatologic disorders.

Time Commitment: (Light to Moderate)

Task Force meets in conjunction with the Annual Meeting and may have periodic conference calls, as necessary. Task force members are strongly encouraged to attend the AADA Legislative Conference in Washington, DC.

Skill Set:

Members should have a strong interest in patient advocacy and in working with patient groups. Task force members work with the Coalition of Skin Diseases on several projects and programs.

Composition: Max #11

1 Chair

1 Deputy Chair

9 At-large Members

2 Residents (*non-voting*) (*not included in count*)

1 Coalition of Skin Diseases (CSD) Advisor (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency; Advisor – 1-year term (can be reappointed)

- *Chair serves concurrent term on the Council on Science & Research*

Council on Community, Corporate and Philanthropic Relations

Reports to: Academy Board of Directors

Mission:

The mission of the Council on Community, Corporate and Philanthropic Relations is to provide strategic direction for the Academy's overall efforts including community outreach initiatives that showcase the commitment of members to the public and position them as experts on skin health and fundraising activities to raise revenue for the Academy's programs and services. Responsibilities include developing and adhering to policies, procedures and guidelines for Academy community programs and individual and corporate financial support. This committee will help and provide support in developing short and long-term plans for Community, Corporate and Philanthropic Relations.

Time Commitment: (Moderate)

Throughout the year, members participate in several meetings and evening conference calls, some of which may include calls or in-person meetings with potential or current donors and/or representatives from industry.

Skill Set:

Have an understanding of how corporate support, philanthropic contributions and community outreach programs support the Academy's strategic vision.

Should lead by example by being a donor to the Academy and being willing to engage with their peers on related fundraising activities.

Demonstrate a commitment to the community, corporate and philanthropic activities of the Academy by:

- Supporting activities that strengthen relationships with donors, prospects, volunteers, and corporate supporters.
- Communicating the impact of Academy initiatives on patients, the public, and members

Be an advocate for Academy programs and philanthropic activities to both internal (members) and external (public) audiences as appropriate.

Maintain absolute confidentiality about all sensitive information received in the course of Council work.

While representing the Academy as a member of the Council on Community, Corporate and Philanthropic Relations, their primary focus should be the Academy. Holding a position in fundraising with another organization would present a conflict of interest and may eliminate a member from being eligible to serve on the Council on Community, Corporate and Philanthropic Relations.

Council on Community, Corporate and Philanthropic Relations (continued)

Composition: Max #13

1 Chair

1 Deputy Chair

7 Ex-officio Members (*voting*)

- Chair, Community Outreach Programs Committee
- Chair, Corporate Relations Committee
- Chair, Education and Volunteers Abroad Committee
- Chair, Philanthropic Relations Committee
- Chair, Melanoma/Skin Cancer Community Programs Committee
- Secretary-Treasurer
- Assistant Secretary-Treasurer

4 At-large Members (3 At-large members in years when Deputy Chair appointed)

1 Ex-officio Member (*non-voting*) (*not included in count*)

- Board of Director (BOD Liaison)

Appointment Term:

Chair – four-year term; Deputy Chair – two-year term (appointed in third year of Chair term); Member – three-year term

Note:

- Chair serves concurrent term on the WG – RRT – Rapid Response Team – Corporate
- Assistant Secretary-Treasurer serves as Board Liaison
- Residents are not eligible to serve on the committee.
- Guest observers may not participate in meetings.
- **Those who hold a position in fundraising with another organization that would present a conflict of interest are not eligible to serve on this committee; the Academy should be the members primary focus while serving on this council.**
- **Members who run their own program or conference are not eligible to serve on this entity.**

All members of the Council on Community, Corporate and Philanthropic Relations and the committees that report to the Council are highly encouraged to make a philanthropic donation to the Academy.

Name	Giving Level
1938 Legacy Society*	Transformational Gift
Blue Visionary	\$5,000+
AAD Pride	\$2,500 - \$4,999
Derm Nation**	\$1,000 +

*A transformational gift is typically over \$10,000 or is a planned gift of significance

**Young Physicians qualify for derm nation at \$250+

Council on Community, Corporate and Philanthropic Relations (continued)

EUGENE J. VAN SCOTT AWARD FOR INNOVATIVE THERAPY OF THE SKIN AND PHILLIP FROST LEADERSHIP LECTURE

The members of the Selection Panel were named by Dr. Frost when the initial agreement was made. They represent the institutions with which he was associated early in his career (UPenn, NIH, and University of Miami). The Chair of the Council on Community, Corporate and Philanthropic Relations also serves as Chair of the Selection Panel.

RRT – Rapid Response Team – Corporate

(Reference – BGP – Honoraria and Travel Expense Reimbursement Policies for Non-CME Industry Funded Educational Activities)

Composition:

Chair, Council on CCPR

Chair, Council on Education

Chair, Corporate Relations Committee

Secretary Treasurer and/or Assistant Secretary Treasurer

Staff liaisons: Chief officers of the Education and Community, Corporate and Philanthropic Relations departments

Community Outreach Programs Committee

Reports to: Council on Community, Corporate & Philanthropic Relations

Mission Statement:

The mission of the Community Outreach Programs Committee is to be responsible for identifying new endeavors and target audiences for which the Academy strives to work within select communities for specific dermatologic-related skin conditions. The Committee helps to determine success metrics, criteria for outreach audiences and policies for growth and expansion.

Time Commitment: (Light to Moderate)

One face-to-face meeting at the Academy's Annual Meeting and one to two conference calls throughout the year. Review and judging of annual shade structure grant applications as well as Good Skin Knowledge video contest applicants. Participation at one of the six week-long Camp Discovery camps sometime during his/her tenure on the committee is encouraged.

Skill Set:

- Experience with and passion for reaching underserved communities.
- Experience in addressing community needs.
- Experience with creating replicable programs in local communities.
- Strong networking skills/willingness to leverage relationships to support AAD-led programs.
- Community involvement/volunteerism experience preferred.
- Desire/experience working with other orgs to bring outreach efforts to communities.

Composition: Max #13

1 Chair

1 Deputy Chair

11 At-large Members

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency

Note:

- **Members who run their own program or conference are not eligible to serve on this entity.**

Community Outreach Programs Committee (continued)

All members of the Council on Community, Corporate and Philanthropic Relations and the committees that report to the Council are highly encouraged to make a philanthropic donation to the Academy.

Name	Giving Level
1938 Legacy Society*	Transformational Gift
Blue Visionary	\$5,000+
AAD Pride	\$2,500 - \$4,999
Derm Nation**	\$1,000 +

*A transformational gift is typically over \$10,000 or is a planned gift of significance

**Young Physicians qualify for derm nation at \$250+

Corporate Relations Committee

Reports to: Council on Community, Corporate and Philanthropic Relations

Mission Statement:

The mission of the Corporate Relations Committee is to be responsible for the review, evaluation and recommendation of policies related to corporate relations. Assist with guidance on, and participate as needed in, development of relationships with corporate supporters.

Time Commitment: (Moderate)

Committee meets in conjunction with the Annual Meeting and AAD Innovation Academy, as well as the Industry Summit Meeting in the spring. Members may be asked to participate in meetings with industry, as well as evening conference calls as needed.

Skill Set:

- CANNOT be currently serving on Council on Community, Corporate and Philanthropic Relations, SkinPAC or Philanthropic Relations Committee
- Have previously served on another CCPR committee
- Be able to facilitate industry introductions and make recommendations on ways to approach industry.
- Demonstrate a knowledge of and commitment to the philanthropic programs/products the Academy has to offer.
- Maintain absolute confidentiality about all sensitive information received in the course of Committee work.
- High integrity and respect as perceived by members and industry.
- Understanding of the appropriate roles industry plays in dermatology and the Academy.
- Ability to participate in a balanced and unbiased way in deliberations regarding corporate relations.

Composition: Max #11

1 Chair

1 Deputy Chair

8 At-large Members

1 Ex-officio Member (*voting*)

- Young Physicians Committee Member

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term

- *Chair serves concurrent term on the Council on Community, Corporate and Philanthropic Relations*
- *Chair serves concurrent term on the WG – RRT – Rapid Response Team - Corporate*

Corporate Relations Committee (continued)

Note:

- Residents are not eligible to serve on the Committee.
- Guest observers may not participate in meetings.
- **Members who run their own program or conference are not eligible to serve on this entity.**
- **No corporate members/corporate environment**

All members of the Council on Community, Corporate and Philanthropic Relations and the committees that report to the Council are highly encouraged to make a philanthropic donation to the Academy.

Name	Giving Level
1938 Legacy Society*	Transformational Gift
Blue Visionary	\$5,000+
AAD Pride	\$2,500 - \$4,999
Derm Nation**	\$1,000 +

*A transformational gift is typically over \$10,000 or is a planned gift of significance

**Young Physicians qualify for derm nation at \$250+

Education and Volunteers Abroad Committee

Reports to: Council on Community, Corporate and Philanthropic Relations

Mission Statement:

The mission of the Education and Volunteers Abroad Committee is to improve dermatologic care to those in underserved areas through the provision of education and service. Their areas of focus include oversight for: Resident International Grant (RIG), Native American Health Service (NAHS), Skin Care in Developing Countries, Health Volunteers Overseas and Volunteers Aboard Course (VAC). Provide oversight for the Skin Disease Education Cards.

Time Commitment: (Moderate)

In-person Committee meeting in conjunction with the Annual Meeting and participates approximately 25-30 hours/year reviewing applications online for various grants and scholarships offered. April, July, and October are key months for reviewing applications.

Skill Set:

- Knowledge/experience in grant making.
- Interest/willingness to review/judge/score grant applications three times per year with up to 15 applications in each round.
- Knowledge of international dermatology helpful
- Understanding of unique dermatological issues that present in low resourced areas.
- Knowledge/experience/understanding of unique cultural issues as it relates to underserved populations.
- Committee members do not travel

Composition: Max #15

1 Chair

1 Deputy Chair

2 Ex-officio Members (Grant Program Directors) (*voting*)

- Resident International Grant (RIG)
- Native American Health Service (NAHS)

10 At-large Members

1 At-large International Member

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency

- *Chair serves a concurrent term on Council on Community, Corporate and Philanthropic Relations*
- *Chair serves a concurrent term on International Affairs Committee*

Note:

- **Members who run their own program or conference are not eligible to serve on this entity.**

Education and Volunteers Abroad Committee (continued)

All members of the Council on Community, Corporate and Philanthropic Relations and the committees that report to the Council are highly encouraged to make a philanthropic donation to the Academy.

Name	Giving Level
1938 Legacy Society*	Transformational Gift
Blue Visionary	\$5,000+
AAD Pride	\$2,500 - \$4,999
Derm Nation**	\$1,000 +

*A transformational gift is typically over \$10,000 or is a planned gift of significance

**Young Physicians qualify for derm nation at \$250+

Philanthropic Relations Committee

Reports to: Council on Community, Corporate & Philanthropic Relations

Mission Statement:

The mission of the Philanthropic Relations Committee is to develop and implement strategies to increase charitable giving to the Academy by members and other individuals. Committee members will actively engage in peer-to-peer solicitations and ongoing stewardship of individual donors. Committee members will also assist in the identification and cultivation of prospective donors and serve as ambassadors for the philanthropic efforts of the Academy.

Time Commitment: (Moderate)

Throughout the year, members will participate in meetings at the Annual Meeting and AAD Innovation Academy and periodic conference calls. Approximately 1-2 hours monthly (at a maximum) required for donor stewardship activities such as thank you letters and phone calls, excluding any in-person visits or solicitations that may be required.

Skill Set:

- Be committed to the AAD's mission and take personal ownership in its success.
- Be an active and consistent donor to AAD philanthropy.
- Demonstrate a commitment to learning about philanthropic programs of the AAD and how to speak comfortably about their importance.
- Be able and willing to open doors to donors and prospects in their network and in their community when appropriate.
- Willingness to support AAD staff in fundraising activities including in-person solicitation, cultivation and stewardship. Members should represent a broad range of ages, practice settings and geographic locations.
- Must maintain absolute confidentiality about all sensitive information received in the course of their committee work.
- Those who hold a position in fundraising with another organization that would present a conflict of interest are not eligible to serve on this committee.

Composition: Max #11

1 Chair

1 Deputy Chair

9 At-large Members

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term

Note:

- Residents are not eligible to serve on the committee.
- Members serving on the Philanthropic Relations Committee should not serve concurrently on SkinPAC.
- **Members who run their own program or conference are not eligible to serve on this entity.**

Philanthropic Relations Committee (continued)

All members of the Council on Community, Corporate and Philanthropic Relations and the committees that report to the Council are highly encouraged to make a philanthropic donation to the Academy.

Name	Giving Level
1938 Legacy Society*	Transformational Gift
Blue Visionary	\$5,000+
AAD Pride	\$2,500 - \$4,999
Derm Nation**	\$1,000 +

*A transformational gift is typically over \$10,000 or is a planned gift of significance

**Young Physicians qualify for derm nation at \$250+

Melanoma/Skin Cancer Community Programs Committee

Reports to: Council on Community, Corporate & Philanthropic Relations

Mission Statement:

The mission of the Melanoma/Skin Cancer Community Program Committee is to serve as an expert advisory committee for issues related to melanoma and other skin cancers and is responsible for the SPOTme™ skin cancer screening program under the SPOT Skin Cancer initiative. The Committee's work fortifies the Academy's leadership role in defining and directing a national public education campaign to eradicate and prevent skin cancer, focusing efforts on how to Prevent, Detect, and Live, which is SPOT Skin Cancer. The Committee's key activities are collecting trend data and metrics for melanoma and non-melanoma skin cancers, reviewing, and evaluating community outreach efforts and collaborating with other stakeholders to motivate key audiences to change their behavior through innovative activities and programs.

Time Commitment: (Light)

One face-to-face meeting at the Academy's Annual Meeting, one to two conference calls throughout the year, and periodic workgroup assignments. Volunteering to conduct an Academy SPOTme skin cancer screening is required.

Skill Set:

- Expertise in public health/community issues/activities promoting skin cancer awareness, prevention, and detection.
- Participation in the academy's free skin cancer screening program
- Understanding/experience/ knowledge of other stakeholders/groups working on skin cancer awareness

Composition: Max #11

1 Chair

1 Deputy Chair

9 At-large Members

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency

- *Chair also serves concurrent term on Council on Community, Corporate and Philanthropic Relations*
- **Members who run their own program or conference are not eligible to serve on this entity.**

Melanoma/Skin Cancer Community Programs Committee (continued)

All members of the Council on Community, Corporate and Philanthropic Relations and the committees that report to the Council are highly encouraged to make a philanthropic donation to the Academy.

Name	Giving Level
1938 Legacy Society*	Transformational Gift
Blue Visionary	\$5,000+
AAD Pride	\$2,500 - \$4,999
Derm Nation**	\$1,000 +

*A transformational gift is typically over \$10,000 or is a planned gift of significance

**Young Physicians qualify for derm nation at \$250+

Council on Communications

Reports to: Academy Board of Directors

Mission Statement:

The mission of the Council on Communications is to provide strategic oversight and direction that guides the development and implementation of multi-faceted communications program aimed at:

- Promoting American Board of Medical Specialties (ABMS) and American Osteopathic College of Dermatology (AOCD) board-certified dermatologists to the public and patients as THE experts in the diagnosis and treatment of the skin, hair, and nails.
- Sharing the AAD's brand story to members and promoting the value of membership
- Positioning dermatologists with health care policymakers as critical contributors to the health care system.
- Reinforcing dermatology as a specialty committed to advancing quality patient care through state-of-the-art scientific research.
- Encouraging public understanding of skin health, the impact of skin disease on patients, and behaviors that promote healthy skin, hair, and nails.
- Reinforcing the Academy's position on key issues affecting the specialty.

The Council is responsible for approving annual communications plans addressing our primary audiences of patients and the public, non-dermatologist physicians, policymakers, and AAD members and establishing policies and guidelines governing AAD communications initiatives. In addition to strategic direction, some direct oversight and approval, specifically of news releases and public service advertisements, is required.

Time Commitment: (Moderate to Extensive)

- Council members will spend approximately 40-50 hours per year which includes meetings, evening conference calls and the review of materials.
- Most time-intensive preceding Annual Meeting and AAD Innovation Academy and prior to the Academy's other two major media relations outreach activities (in May and October).
- Members must be willing to participate in Council meetings (held in conjunction with the Annual Meeting and AAD Innovation Academy).
- The Council chair reviews all public education content and may be invited to attend Academy board meetings, which increases the time commitment.

Skill Set:

- Academy fellow or resident since the Academy's message emphasize the importance of seeing a board-certified dermatologist.
- Active practitioner with a minimum of (5) years clinical experience, familiarity with evidence-based literature and guidelines of care preferred.
- Familiarity with the Academy's messages and objectives, and the ability to meet deadlines, is essential as Council members review and approve the Academy's public and media communications materials for medical accuracy and consistency.
- Team players with flexible schedules that allow for reviewing materials on short notice.

Council on Communications (continued)

- Prior media training is required as Council members may be called upon by the Academy to respond to media inquiries in their areas of expertise.
- Must be accessible through e-mail technology with the ability to review attachments in Microsoft Word.
- Previous Academy committee experience is preferred.
- Prefer practitioners who are very knowledgeable about the latest research in skin, hair, and nails.
- Prior to being appointed, the Council Chair should have at least (3) years of previous experience as a member of the Council on Communications.

Composition: Max #7

1 Chair

1 Deputy Chair (*appointed two years prior to chair rolling off*)

2 Ex-officio Members (*voting*)

- Chair, Public Education Committee
- Chair, Member Communications Committee

4 At-large Members (*3 At-Large members in years when Deputy Chair appointed*)

1 Ex-officio Member (*non-voting*) (*not included in count*)

- Board of Director (BOD Liaison)

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – four-year term; Deputy Chair – two-year term (**appointed in third year of Chair term**); Member – three-year term; Resident-concurrent with residency.

NOTE:

- **No appointments to adjunct member**

Member Communications Committee

Reports to: Council on Communications

Mission Statement:

The mission of the Member Communications Committee is to oversee and provide strategic direction on brand voice, tone, formats, and frequency of communications to Academy membership. The Committee's feedback and insight help to improve AAD and AADA member communications to increase member engagement with the Academy's brand and key messages.

Time Commitment: (Light)

- One in-person meeting/Academy's Annual Meeting, 2-3 conference calls annually.
- Members must be willing to participate in Committee meetings (held in conjunction with the Annual Meeting and AAD Innovation Academy).

Skill Set:

- Academy fellow or resident.
- Active practitioner with a minimum of five (5) years clinical experience.
- Must be accessible through e-mail technology with the ability to review Microsoft Word attachments.
- Familiarity with the Academy's messages and objectives.
- Previous Academy committee experience is preferred.
- Prefer practitioners who have served on a communications committee in a membership organization, (i.e.: community, local, regional, or state dermatology society).

Composition: Max #9

1 Chair

1 Deputy Chair

5 At large Members

2 Ex-officio Members (*voting*)

- Physician Editor, Dermatology World
- Advisory Board Representative (appointed by Advisory Board Chair)

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency

NOTE:

- **No appointments to adjunct member**

Public Education Committee

Reports to: Council on Communications

Mission Statement:

The mission of the Public Education Committee is to develop accurate, clear, and concise Academy content to educate the public and patients about the diagnosis and medical, surgical, and cosmetic treatments of skin, hair, and nail conditions. This includes printed, online and video public education content that emphasizes the dermatologist as the medical expert for skin, hair, and nail conditions.

Time Commitment: (Extensive)

- Committee members will spend approximately 60-75 hours per year which includes meetings, evening conference calls and the review of materials.
- Members must be willing to participate in Committee meetings (held in conjunction with the Annual Meeting and AAD Innovation Academy).

Skill Set:

- Academy fellow or resident since the Academy's messages emphasize the importance of seeing a board-certified dermatologist.
- Active practitioner with a minimum of five (5) years clinical experience, familiarity with evidence-based literature and guidelines of care preferred.
- Must be accessible through e-mail technology with the ability to review attachments in Microsoft Word.
- Ability to translate science into public education messages at the sixth-grade level.
- Familiarity with the Academy's messages and objectives, and the ability to meet deadlines, is essential as Committee members review and approve the Academy's public and patient education content for medical accuracy and consistency.
- Previous Academy committee experience is preferred.
- Prefer practitioners who are very knowledgeable about the latest research in skin, hair, and nails.

Composition: Max #9

1 Chair

1 Deputy Chair

7 At-large Members

2 Residents (*non-voting*) (*not included in count*)

Automatic appointment - 1 Consultant (3-year appointment) (Representative from Dermatology Nurses Association) (*non-voting*)

Public Education Committee (continued)

(Review the Academy's public education content, such as pamphlets and Video of the Month scripts and news releases. Along with the rest of the committee, she/he would review the content for medical accuracy and consistency in messaging with existing Academy guidelines and information. The nurse consultant does not count towards quorum; however, she/he is still encouraged to share their feedback/edits on materials.

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency

NOTE:

- **No appointments to adjunct member**

Council on Education

Reports to: Academy Board of Directors

Mission Statement:

The mission of the Council on Education is to ensure that the educational program and its learning activities, products, resources, and services provided are consistent with the vision and values for AAD Education.

Vision: The American Academy of Dermatology is recognized as the preeminent source for dermatology education.

Values: Learning Resources are evidence-based, timely and relevant; Education programs are innovative and aligned with recertification and licensure requirements; Education programs and products are engaging diverse audiences; Delivery formats are designed to meet the needs and preferences of life-long learners; the portfolio of services and programs are consistent with AAD strategic priorities and initiatives.

Time Commitment: (Moderate)

Members are expected to attend Council meetings at both the Annual Meeting and AAD Innovation Academy, participate in evening conference calls and email ballots throughout the year, review and approve educational programs and content on an as needed basis, and participate in strategic educational sessions to evaluate the Academy's CME program.

Skill Set:

The Council on Education is chaired by a physician with experience serving on Task Forces and Committees under the Council on Education.

Composition: Max #9

1 Chair

1 Deputy Chair

4 Ex-officio Members (*voting*)

- Chair, Education Research Committee
- Chair, Learning Resources Committee
- Chair, Scientific Assembly Committee
- Chair, Sulzberger Dermatologic Institute and Education Grants Committee

4 At-large Members with demonstrated experience in CME/MOC (**3 At-large Members in year Deputy Chair appointed**)

1 Ex-officio Member (*non-voting*) (*not included in count*)

- Board of Director (BOD Liaison)

2 Residents (*non-voting*) (*not included in count*)

Appointment Term: Chair – four-year term; Deputy Chair – two-year term (appointed in third year of Chair term); Member – three-year term; Resident-concurrent with residency; BOD Liaison-concurrent with board term

- *Chair serves concurrent term on the Scientific Assembly Committee*
- *Representative serves a concurrent term on Council on Practice Management*

Council on Education (continued)

Note:

Chair is expected to attend Board Meetings and encouraged to attend meetings of committees/task forces reporting to the Council. The chair is encouraged to participate in CME-related professional development activities such as the Alliance for Continuing Education in the Health Professions Annual Meeting and Accreditation Council for Continuing Medical Education (ACCME) Workshops, as necessary.

RRT – Rapid Response Team – Education

(Reference – BGP – Honoraria and Travel Expense Reimbursement Policies for CME Activities)

Composition:

Secretary Treasurer

Assistant Secretary Treasurer

Chair, Council on Education

Education Research Committee

Reports to: Council on Education

Mission Statement:

The mission of the Education Research Committee is to identify knowledge, competency, and practice gaps through the evaluation of the Academy's portfolio of educational activities. The Committee is also responsible for content resources through the Curriculum Task Force. The Committee synthesizes outcomes data and content analysis to address identified knowledge, competency, or practice gaps. Results are communicated to the appropriate committees, task forces and work groups (CCTFs) to support program development.

Time Commitment: (Moderate)

Chair

- Help lead the committee in accomplishing tasks necessary to achieve its mission, including oversight of the Academy's needs assessment and outcomes measurement processes, guidance in the development and maintenance of the educational gaps library, and communicating identified gaps to the appropriate CCTFs
- Attendance at committee meetings (Annual Meeting and AAD Innovation Academy)
- The initial time commitment is estimated to be 4-5 hours a month and then once processes are set, 2-3 hours per month (phone calls and emails)

Members (1-2 hours per month, on average)

- Committee meets in-person at the Annual Meeting and AAD Innovation Academy, if necessary
- Participate in conference calls and email ballots throughout the year, and review and approve needs assessment and evaluation methodologies on an as needed basis
- Responsible for identifying sources of knowledge, competence, and practice gaps, ranking educational needs, and making recommendations for development of content to address educational needs.

Skill Set:

Committee members include a physician chair with demonstrated experience in the identification of knowledge, competence and practice gaps, analysis of gaps, and formative and summative evaluation. A member who also has expertise in basic science and epidemiology would be beneficial.

Education Research Committee (continued)

Composition: Max #12

1 Chair

1 Deputy Chair

5 Ex-officio Members

- Chair, Curriculum Task Force
- Deputy Chair, Curriculum Task Force
- Clinical Guidelines Committee Representative
- Practice Management Committee Representative
- Patient Safety & Quality Committee Representative

5 At-large Members

- 2 At-Large Members in medical dermatology/epidemiology
- 1 At-Large Member in pediatric dermatology
- 1 At-Large Member in dermatopathology
- 1 At-Large Member in dermatological surgery

2 Residents (*non-voting - not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency

- *Chair serves concurrent term on Council on Education, Scientific Assembly Committee & Learning Resources Committee*

Curriculum Task Force

Reports to: Education Research Committee

Mission Statement:

The mission of the Curriculum Task Force is to develop and maintain the core curriculum of dermatology and the basic dermatology curriculum materials to ensure that the content includes diverse patient populations, currency of knowledge and is relevant to the field of dermatology.

Time Commitment: (Moderate to Extensive)

Task Force meets in conjunction with the Annual Meeting and participates in evening conference calls, as necessary. All content development handled by the workgroup reporting to the Task Force is handled via email. It is important for Members to meet stated publication deadlines. Members are required to participate in the development and maintenance of the Academy's core curriculum. Members must be able to submit and edit in electronic formats.

Skill Set:

Members are required to participate in the development and maintenance of the Academy's core curriculum. Members are required to have experience in curriculum development specifically for post graduate education. Members should be familiar with relevant current medical knowledge and practice. Members must be able to submit and edit in electronic formats.

Composition: Max #13

1 Chair

1 Deputy Chair

11 At-large Members

2 Residents (*non-voting - not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency

- *Chair serves concurrent term on Education Research Committee*
- *Deputy Chair serves concurrent term on Education Research Committee*

Learning Resources Committee

Reports to: Council on Education

Mission Statement:

The mission of the Learning Resources Committee is to be responsible for the development of the Academy's self-directed learning activities, many of which are delivered in a digital format. The Committee serves in an advisory capacity to staff on new and existing learning activities that do not have oversight by a task force or committee. The Committee also makes recommendations on current self-directed learning activities for continued relevance.

Time Commitment: (Light)

Committee meets in conjunction with the Annual Meeting and AAD Innovation Academy, if necessary. Members also participate in occasional evening conference calls and email ballots throughout the year, and review and approve educational programs and content on an as needed basis.

Skill Set:

Ideally diverse group of specialties should be represented. Committee members include a physician chair who has served on a variety of enduring materials-producing task forces or workgroups. Members include Chairs of reporting Task Forces:

- Dialogues in Dermatology Task Force (Editorial Board)
- Members with demonstrated experience in development of self-study educational activities

Composition: Max #11

1 Chair

1 Deputy Chair

6 At-large Members

3 Ex-officio Members (*voting*)

- Chair, Dialogues in Dermatology
- Chair, Self-Assessment Task Force
- Chair, Education Research Committee

2 Residents (*non-voting - not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident concurrent with residency

Note:

Chair who has served on a variety of enduring materials task forces or workgroups. Members with demonstrated experience in development of self-study educational activities.

Dialogues in Dermatology (Editorial Board)

Reports to: Learning Resources Committee

Mission Statement:

Dialogues in Dermatology, as the official podcast of the American Academy of Dermatology, educates its subscribers on current, practical information from the entire spectrum of dermatology and its subspecialties, and provides opportunities for improving their practice. Additionally, the audio presentation in a dialogue and commentary format enables the subscriber to utilize this information to improve their dermatological practice.

Time Commitment: (Moderate)

Committee meets in conjunction with the Annual Meeting and AAD Innovation Academy, if necessary. Members of this Editorial Board are expected to record interviews during the Annual Meeting and remotely throughout the year, as necessary. Minimum of 2 interviews per year approximately 20 minutes per interview.

Skill Set:

Comfortable with recorded media, conducting interviews and selecting of subject matter for interviews.

Composition: Max #16

1 Editor-in-Chief

1 Deputy Editor

13 Associate Editors

1 Immediate Past Editor

2 Residents (*non-voting - not included in count*)

Dialogues in Dermatology (Editorial Board) (continued)

Appointment Terms:

Role: *Editor-in-Chief*, voting member

Editor identifies topics and subject matter experts for recordings, reviews content, and edits interviews. Editor presents his/her appointment recommendations to the Appointment Selection Committee. The individual appointed must have served a term as Associate Editor.

Term: Two-year term with one-time, two-year renewal at the discretion of the President and/or President-elect.

Role: *Deputy Editor*, voting member

Works in conjunction with the Editor-in-Chief to identify topics and subject matter experts for recordings, review content, and edit interviews. Prior to a Deputy Editor moving into the Editor-in-Chief position, a determination will be made whether to ascend to the Editor-in-Chief position, Associate Editor position or their term is considered complete.

Term: Two-year term with one-time, two-year renewal at the discretion of the President and/or President-elect.

Role: *Immediate Past Editor*, voting member

Automatic appointment following final term as Editor-in-Chief

Term: Two-year term (limited to two consecutive terms)

Only Dialogues in Dermatology Editorial Board has Immediate Past Editor

Role: *Associate Editors, voting member*

Appointed by the Editor-in-Chief and approved by the Appointment Selection Committee for ratification.

Term: Three-year term, renewable at the discretion of the Editor-in-Chief with no limit on the maximum number of terms.

Role: *Resident Editor*, non-voting member

Term: Second-year resident serves two-year term; Third-year resident serves one-year term.

Responsibilities: Assists Editor-in-Chief with research, review, and other duties for each recording; works intensively throughout the year

Self-Assessment Task Force

Reports to: Learning Resources Committee

Mission Statement:

The mission of the Self-Assessment Task Force is to be responsible for the development and oversight of AAD self-assessment activities. The task force makes recommendations for new self-assessment activities and phasing out activities that no longer meet a member need. The task force creates content development workgroup(s) to ensure relevant and timely delivery of self-assessment activities.

Time Commitment: (Moderate)

The Self-Assessment Task Force meets at Annual Meeting and conference calls as needed (no more than 4 per year). Members edit and review a variety self-assessment content for Question of the Week and Case Challenges, working with AAD staff to determine and meet content delivery deadlines. Members may be asked to develop Case-based content for self-assessment products.

Skill Set:

Ideally, a diverse group of specialties should be represented. Members will need the ability to develop, or review/edit content based on the needs of the target audience including dermatologists at various career stages and sub-specialties. Experience with authoring, editing, and reviewing self-assessment or case-based questions/content in the ABD question-writing style preferred. As this task force oversees development of content for U.S. member designed to meet American Board of Dermatology requirements, representation from an international member may not be appropriate.

Composition: Max #7

- 1 Chair
- 1 Deputy Chair
- 1 Chair/Editor-in-Chief Question Bank/Board Prep Plus Editor Workgroup
- 4 At-large Members
- 2 Residents (*non-voting - not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency

Scientific Assembly Committee

Reports to: Council on Education

Mission Statement:

The Scientific Assembly Committee plans, implements and evaluates the educational programs of the Annual Meeting and AAD Innovation Academy. These educational programs should include but not be limited to the enhancement of quality and safety of dermatologic care. It also maintains and advances the excellence of educational programs based on scientific, clinical and practice information needs of the membership.

Time Commitment: (Moderate)

(One month prior to Annual Meeting and AAD Innovation Academy)

The term of the appointment is approximately five years. Incoming members are strongly encouraged to attend the Fall SAC meeting as guests prior to the start of the appointment. Includes two in-person meetings (Spring planning meeting and Fall planning meeting); possibly 1-2 conference calls and/or email ballots throughout the year.

Responsibilities:

As a member of this committee, two of the responsibilities will be chairing an AAD Innovation Academy and three years later the Annual Meeting. During the last year of term, member will also be chair of the Scientific Assembly Committee and sit as a member of the Council on Education.

Skill Set:

A member who has been a long-time participant on AAD educational programs as a director and faculty member. Must be well-versed in the structure and function of the meetings and have a broad understanding of the membership/leadership and their respective areas of expertise in order to provide candid and valuable input into the programming process, and to recommend directors/speakers for various sessions.

Specialties represented on this committee are:

- Medical Dermatology (2 members)
- Pediatric Dermatology (1 member)
- Dermatopathology (1 member)
- Dermatological Surgery (1 member)

Composition: Max #14

1 Chair will rotate among the dermatological specialties.

4 At-large Members

9 Ex-officio Members (*voting*)

- President
- President-elect
- Secretary-Treasurer
- Assistant Secretary-Treasurer
- Chair, Council on Education
- Chair, Education Research Committee
- Chair, Named Lectureship Task Force
- Chair, International Affairs Committee
- Representative Young Physicians Committee

1 Resident (*non-voting - not included in count*)

Scientific Assembly Committee (continued)

Young Physician SAC Representative:

Role – The Young Physician member of the Scientific Assembly Committee will provide input from an early career dermatologist perspective to the development of scientific programs for Annual Meeting and AAD Innovation Academy in order to meet the educational and technological needs of young physicians.

Requirements:

- Must be a Young Physician who has been out of residency/fellowship no more than 8 years throughout the term.
- Must be able to attend two, in-person meetings per year (spring and fall planning meetings); participate in possibly 1-2 conference calls and respond to email ballots in a timely manner throughout the year.
- The Young Physician member representative will have good understanding of the structure and function of Academy meetings, have a broad understanding of membership/leadership, and have participated in conferences/meetings as a session director and/or speaker.
- If serving on the YPC, both terms should coincide.

Selection Process:

- A one-page statement of interest and summary of key qualifications must be submitted with a CV to the Vice President, Member Relations & Engagement who serves as the staff liaison of the Young Physicians Committee, no later than 30-45 days prior to the meeting with Executive Office.
- An email ballot with those expressing interest will be prepared with accompanying documentation and sent to YPC members.
- The candidate with the most votes will be notified. In the event of a tie, the YPC Chair (unless a conflict of interest exists) or Scientific Assembly Committee Chair will make the final selection.

Appointment Term:

Chair – one-year term (Most senior at-large member is elevated to Chair) – will also serve as Chair of the AAD Innovation Academy two years prior to their Annual Meeting Chair appointment.

At-large term - five-year term – selected the spring prior to official term start date.

Chairs - Committee and Task Force serve concurrent terms to their respective council, committee, and task force term.

Note:

- Guest observers may not participate in meetings.
- **Members who run their own program or conference are not eligible to serve on this entity.**

Named Lectureship Task Force

Reports to: Scientific Assembly Committee

Mission Statement:

The mission of the Named Lectureship Task Force is to be responsible for administering and selecting recipients for the Marion B. Sulzberger Award Lectureship (Lila Gruber Fund of the Academy), Clarence S. Livingood, MD Lectureship, Lila and Murray Gruber Memorial Cancer Research Award the Everett C. Fox, MD Memorial Award and Lectureship, the John Kenney, Jr, MD Memorial Award and Lectureship and the A. Paul Kelly, MD Research Award and Lectureship. The Task Force will periodically, review the Administrative Policies for each lecture and recommend revisions to the Board of Directors, as necessary. The Task Force will solicit nominations, review the qualifications of nominees in relation to the Administrative Policies, and recommend awardees to the Scientific Assembly Committee.

Time Commitment: (Moderate)

(4 weeks prior to the Annual Meeting approximately 15-20 hours a year)

Prior to the Annual Meeting there is a heavy concentration of materials to be reviewed, which will be discussed when the Task Force meets at the Annual Meeting. Potentially, 2-3 evening conference calls. Task Force members will need 1-hour preparation reviewing materials prior to each call.

Skill Set:

A long-time and involved member of the Academy who has a very thorough understanding of the lectureships in these categories (Sulzberger Lectureship—Annual Meeting; Livingood Lectureship—Annual Meeting; Lila Gruber Lectureship—Annual Meeting; and Fox Lectureship—AAD Innovation Academy), the backgrounds & histories of them, and of potential candidates for these awards. Sometimes there are a limited number of nominations for an award, and those nominees do not fulfill the award(s) criteria. Therefore, the task force will discuss potential “other” candidates who have not been officially nominated, or those that may have been nominated in recent years. Ideally, the selected candidate should be an individual who has served on multiple councils, committees, and task forces, and is familiar with the Academy’s governance structure. This is one of the Academy’s highest awards/honors, and therefore, individuals serving on this task force should be well-versed with the Academy and its membership.

Composition: Max #7

1 Chair

1 Deputy Chair

5 At-large Members

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term

- *Chair also serves concurrent term on Scientific Assembly Committee*

Note:

- Residents are not eligible to serve on the committee.
- Guest observers may not participate in meetings.

Sulzberger Dermatologic Institute and Education Grants Committee

Reports to: Council on Education

Mission Statement:

The mission of the Sulzberger Dermatologic Institute and Education Grants Committee is to oversee the activities of both the Sulzberger Institute for Dermatologic Education and the PICMED grants programs ensuring that the processes for selection and support of the activities are consistently applied. Work groups may be assigned to each of the functions to ensure alignment with the intended purposes of the individual grants processes.

Time Commitment: (Moderate)

Committee meets in conjunction with the Annual Meeting and AAD Innovation Academy, and at least 1-2 evening conference calls. Extensive review of 15-25 grant applications in January and February in preparation for the committee meeting which is held at the Annual Meeting. Applications may be up to 100 pages.

Skill Set:

The committee is responsible for the Annual Grant Program, funding development of technological applications for the delivery of dermatologic education. Understanding of grants programs is extremely helpful. Focus on research or technology related to dermatology is also helpful. As some grant applications focus on programs for an international audience, representation from an International member could be beneficial here.

Composition: Max #11

- 1 Chair
- 1 Deputy chair
- 9 At-large Members
- 2 Residents (*non-voting - not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency

Council on Government Affairs and Health Policy (GAHP)

Reports to: Association Board of Directors

Mission Statement:

The mission of the Council on Government Affairs and Health Policy is to ensure that dermatologists and their patients are well-represented by providing leadership and oversight in the coordination of federal and state government affairs, health care policy and practice-related activities in an effort to cultivate member engagement, and to promote a culture of professional responsibility.

Time Commitment:

The Council members participate in evening conference calls held the first Wednesday of each month (approximately 1–1 ½ hours). Often members must respond rapidly to emergent issues via email. The Council typically holds two in-person meetings a year in conjunction with the Annual Meeting and AAD Innovation Academy.

Skill Set:

Active practitioner with background in practice issues and policy development process. Previous involvement with state medical or dermatologic society policy issues ideal.

Composition: Max #17

1 Chair

1 Deputy Chair

15 Ex-Officio Members (*voting*)

- Chair, Access to Dermatologic Care Committee
- Chair, Congressional Policy Committee
- Chair, Dermatopathology Committee
- Chair, Health Care Finance Committee
- Chair, Mohs Micrographic Surgery Committee
- Chair, Patient Access & Payer Relations Committee
- Chair, Regulatory Policy Committee
- Chair, State Policy Committee
- Chair, Advisory Board
- Chair, SkinPAC
- Chair, AMA Dermatology Section
- Chair, MIPS Value Pathways (MVP) Committee
- Representative, Council on Practice Management
- AADA RUC Representative
- AADA CPT Representative

1 Ex-officio Member (*non-voting*) (*not included in count*)

- Board of Director (BOD Liaison)

2 Residents (*non-voting*) (*not included in count*)

Council on Government Affairs and Health Policy (continued)

Additional Non-voting positions/not included in count:

Advisor Liaisons – ASMS; ASDSA; and ACMS (*Note: contingent on meeting criteria of Position Description)

* Advisor Liaison (sister society representative with federal lobbyist and/or dedicated advocacy staff, one-year; renewable) (*Position Description available in Governance Handbook*)

Appointment Terms:

Chair – four-year term; Deputy Chair - two-year term (**appointed in third year of Chair term**); Ex-officio Members concurrent with appointment term, Resident-concurrent with residency

- *Representative to serve concurrent term on Council on Practice Management*
- *Representative to serve concurrent term on Teledermatology Task Force*

The GAHP Leadership Rapid Response Team was formed for the Academy to respond quickly to federal and state government affairs as well as health care policy related issues.

GAHP Leadership Rapid Response Team Core Composition:

- Council on GAHP, Chair
- Board of Directors Liaison
- Advisor
- Reporting Chair(s) as needed/required
 - Based on the issue, the appropriate reporting chair(s) will be asked to participate. (i.e., Federal – Chair Congressional Policy Committee; State – Chair State Policy Committee; Regulatory – Chair Regulatory Policy Committee; etc.)

The Council on GAHP Scope of Practice/Truth-in-Advertising (SOP/TIA) Triage Team is charged to respond quickly to the politically sensitive issues of scope of practice and truth-in-advertising issues.

GAHP Scope of Practice/Truth-in-Advertising (SOP/TIA) Triage Team Composition:

- Secretary Treasurer, Chair
- Immediate Past Chair, SOP/TIA Triage Team
- Chair, Council on Government Affairs & Health Policy (GAHP)
- Immediate Past Chair, Council on GAHP
- Chair, Grassroots Advocacy Task Force
- Chair, State Policy Committee
- Chair, Advisory Board
- Chair, Professionalism & Ethics Committee

Access to Dermatologic Care Committee (ADCC)

Reports to: Council on Government Affairs and Health Policy

Mission Statement:

The mission of the Access to Dermatologic Care Committee is to analyze the composition of the dermatologic workforce and distribution of dermatologic care in the United States, raise awareness of health disparities, and evaluate access to dermatologic care amongst different US populations. The Committee will also promote innovative ways to enhance the equity of dermatologic care to disadvantaged and marginalized populations. In addition, this Committee will obtain, evaluate, and disseminate scientifically sound data on the diversity of the dermatologic workforce, addressing the issue of sufficient numbers of dermatologists, and ameliorating manpower deficiencies in both civilian and government sectors.

Time Commitment: (Moderate)

Members should be available to attend the Committee meeting that occurs in conjunction with the Annual Meeting and AAD Innovation Academy and be willing to participate in 4-6 evening conference calls per year. An additional 18-24 hours per year for additional project work will be handled via email depending on projects.

Skill Set:

For this committee, there would be a preference given to Academy members that are interested in health disparities affecting populations identified by but not exclusive to race/ethnicity, socioeconomic status, geography, gender, age, and disability status within the field of dermatology.

Composition: Max #9

1 Chair

1 Deputy Chair

6 At-large Members

1 Ex-officio Member

- Representative from the LGBTQ/SGM Health Expert Resource Group

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency

- *Chair serves concurrent term on Council on Government Affairs and Health Policy*

Congressional Policy Committee

Reports to: Council on Government Affairs and Health Policy

Mission Statement:

The mission of the Congressional Policy Committee is to effectively and efficiently shape and implement the Academy's legislative agenda by shaping and vetting potential positions with respect to pending legislation and instigating strategies to convey support for those positions. The group would serve as a sounding board for staff, the Council chair, and Academy officers on issues requiring thoughtful but timely analysis as well as action plans for influencing the legislative process.

Time Commitment: (Moderate)

Majority of the committee's business will be conducted via e-mail and or evening conference call. Any necessary in-person meetings will be scheduled in conjunction with the Annual Meeting and AAD Innovation Academy. As congressional action often moves at a rapid pace, members should be accessible by email and be able to respond quickly to requests for action.

Skill Set:

Members of this committee should be active practitioners or academics with a keen interest in federal advocacy efforts on health care policy. The Committee is charged to effectively and efficiently shape and implement the Academy's legislative agenda by shaping and vetting potential positions with respect to pending legislation before the United States Congress. Committee members are frequently asked to provide direct input and serve as a sounding board for staff, the Council chair, and Academy officers on legislative policy issues requiring thoughtful but timely analysis.

Composition: Max #11

1 Chair

1 Deputy Chair

8 At-large Members

1 Ex-officio Member (voting)

- 1 Representative, State Policy Committee

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency

- *Chair serves concurrent term on Council on Government Affairs and Health Policy*

Grassroots Advocacy Task Force

Reports to: Congressional Policy Committee

Mission Statement:

The mission of the Grassroots Advocacy Task Force is in conjunction with Congressional (CPC) and State Policy (SPC) Committees, is to promote and enhance member engagement in the grassroots advocacy activities of the AADA. The GATF promotes leadership in dermatology and excellence in patient care through public policy education and advocacy.

Time Commitment:

Meet in person at the Annual Meeting and at other AADA meetings, as appropriate, along with conference calls to be scheduled on an as-needed basis.

Skill Set:

TBD

Composition: Max #9

1 Chair*

1 Deputy Chair*

2 Ex-officio members (*voting*)

- 1 Representatives, State Policy Committee (*concurrent terms*)
- 1 Representatives, Congressional Policy Committee (*concurrent terms*)

5 At-large members

- AADA Grassroots Advocates**

2 Residents (*non-voting*) (*not included in count*)

* Chair and Deputy Chair will serve two-year terms and should be current members of the CPC or SPC when assuming the Chair/Deputy Chair position. This allows for better understanding of current federal and state policy priorities and better communication between the groups.

** Members that have demonstrated a commitment to grassroots advocacy (attendance at AADA Legislative Conference, participation in AADA grassroots alerts, and/or participation in SkinPAC)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency

NOTE:

- Chair and Deputy Chair should be current members of the CPC or SPC when assuming the Chair/Deputy Chair position. This allows for better understanding of current federal and state policy priorities and better communication between the groups.
- Members that have demonstrated a commitment to grassroots advocacy (attendance at AADA Legislative Conference, participation in AADA grassroots alerts, and/or participation in SkinPAC)

Dermatopathology Committee

Reports to: Council on Government Affairs and Health Policy

Mission Statement:

The mission of the Dermatopathology Committee is to focus on the practice and provision of dermatopathology services by monitoring socioeconomic trends and proposing solutions to ensure sufficient access to dermatology-trained dermatopathologists. The Committee responds to issues that may arise concerning scope of practice, obstacles to reimbursement for dermatopathology services (including policies interfering with in-office labs and choice of dermatopathology consultant), and regulatory and legislative matters.

Time Commitment: Extensive

Committee holds quarterly evening conference calls and additional conference calls are scheduled as needed.

Skill Set:

The chair should have no conflicts of interest. Committee members should have a basic understanding of the complexity related to provision of, and billing for, dermatopathology services. Composition ideally should also include:

- Dermatologists/Dermatopathologists working in various practice settings including but not limited to a Dermatopathologists/Mohs Surgeon
- Dermatologist who reads their own slides
- Retired Dermatopathologist
- Mohs Surgeon
- Private practicing or academic affiliated Dermatologist/Dermatopathologist

Composition: Max #11

1 Chair

1 Deputy Chair

5 At-large Members

4 Ex-officio Members

- Representative, Congressional Policy Committee
- Representative, State Policy Committee
- Representative, Health Care Finance Committee
- Representative, Mohs Micrographic Surgery Committee

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency

- *Chair serves concurrent term on the Council on Government Affairs and Health Policy*
- *Representative serves on the Mohs Micrographic Surgery Committee*

MIPS Value Pathways (MVP) Committee

Reports to: Council on Government Affairs and Health Policy

Mission Statement:

The mission of the MIPS Value Pathways Committee is to oversee all things related to MIPS Value Pathways impacting Dermatology. Provide leadership and oversight and evaluate ideas for the development and execution of Dermatologic MVPs. Serve as a resource to relevant CCTFs and Academy Boards on policy and measure issues related to the MVP program. Monitor developments and propose Academy positions and projects regarding MVPs as appropriate.

Time Commitment: (Moderate)

The Committee's in-person meeting is held in conjunction with the Annual Meeting. Members will also participate in virtual meetings 2-4 times per year. Members should expect to periodically review and provide input/comments on communication from CMS pertaining to MVPs and proposals from members/staff. The Committee is not responsible for measure development, but rather will provide strategic oversight in developing and or reviewing and approving proposed MVPs.

Skill Set:

Experience with:

- External environmental issues (e.g., payment reform, regulation, administrative requirements, etc.) as they relate to dermatology practice.
- Government payment policies and methodologies
- Federal health care regulations, including RUC, CPT, APMs, MIPS reporting, etc
- Performance measures and quality improvement
- Formulating strategic direction, management, collaboration, and team building
- Facilitating productive conflict resolution and consensus building
- Board, Council, Committee and Task Force and member interrelationships
- Meeting management and facilitation skills

Composition: Max #9

1 Chair

1 Deputy Chair

8 Ex-Officio Members (voting)

- Chair or Representative, Health Care Finance Committee
- Chair or Representative, Council on Practice Management
- Chair or Representative, Council on Science and Research
- Chair or Representative, DataDerm Oversight Committee
- Chair or Representative, Patient Safety and Quality Committee
- Chair or Representative, Performance Measurement Committee
- Chair or Representative, Workgroup on Innovation in Payment and Delivery

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term

Health Care Finance Committee (HCFC)

Reports to: Council on Government Affairs and Health Policy

Mission Statement:

The mission of the Health Care Finance Committee (HCFC) is to monitor, advise, advocate and act on payment policy issues that impact dermatologic services provided by AADA members. Such issues may involve payment guidelines and valuations, reporting initiatives that affect reimbursement, code editing software systems and claims processing. The HCFC will advocate for fair treatment of AADA members and their patients through appropriate interaction with and education of concerned parties, including AADA members.

Time Commitment: Extensive (Approximately 30-40 hours per year)

Depending on volume and intensity of coding and reimbursement issues this will vary. Committee meets for two hours in conjunction with the Annual Meeting and one hour in conjunction with the AAD Innovation Academy when a quorum is available and 3-4 one-hour evening conference calls per year.

Skill Set:

- Active practitioner with a minimum of 10 years clinical experience
- Willingness to learn about CPT coding, MIPS, and other payment systems
- Strong interest in dermatology reimbursement issues and payment delivery policy
- Previous Academy or state society task force or committee, or AMA House of Delegates experience preferred
- Experience with quality measures and MIPS reporting preferred
- Strong interest in and understanding of government payment policies and methodologies
- Willingness to respect the confidential nature of the matters that are discussed, including payer data, RUC, CPT, and other sensitive information
- Able to respond thoughtfully and timely to email, as much committee dialogue is over email

Composition: Max #14

1 Chair

1 Deputy Chair

7 At-large Members

5 Ex-officio Members (*voting*)

- Chair, Coding and Reimbursement Committee
- Chair, DermCAC
- AADA RUC Representative
- AADA CPT Representative
- Chair or Representative, Performance Measurement Committee

2 Residents (*non-voting*) (*not included in count*)

Health Care Finance Committee (HCFC) (continued)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency

- *Composition reflects the board realm of the specialty.*

DermCAC

Reports to: Health Care Finance Committee

Mission Statement:

DERMCAC serves as a national coalition of dermatologist representatives selected by their respective state dermatology society. Each representative is committed to monitoring local Medicare policy issues, reporting them to the national committees, and actively participating in local Medicare policy discussions.

Our mission is to actively engage in dialogues with Carrier Medical Directors to review and guide local Medicare medical coverage policies that directly affect the practice of dermatology with the aim of collaboration with Medicare Administrative Contractors (MACs) to establish reasonable, fair policies that prioritize patient well-being.

Time Commitment:

DERMCAC meets once a year in conjunction with the Annual Meeting to discuss Medicare coding and reimbursement issues at the state, regional and national level. DERMCAC members may also be called upon to assist dermatologists in their state in educating health care payers on dermatology-specific coding and reimbursement issues.

Skill Set:

Representatives from state dermatology societies

Composition:

Representatives of state societies

The DermCAC averages about 70 members and has a specific representative for each state and representation for the American Pacific Islands, Puerto Rico, and the Virgin Islands. Some states may have three CACs due to the vast areas especially North and South Dakota.

Appointment Term:

Chair – three-year term; Deputy Chair¹ – three-year term; Member² – three-year term

Note:

Not part of the appointment process

- Exception to the one-appointment rule
- Chair term may be extended another full or partial term in the event the Deputy Chair is not filled or unable to assume position. This does not prohibit the Chair from serving another term as Chair at a later period
- No term limit on DermCAC representatives

¹ At least three months prior to assuming the role of Chair, a call for interest will be sent to DermCAC representatives, followed by a vote of the DermCAC representatives attending the DermCAC committee meeting during the AAD Annual Meeting or via email ballot when an annual meeting does not occur; when there is a vacancy, a call for interest will be sent followed by a vote. To be elected, an individual must receive a vote in the affirmative by half the DermCAC representatives voting in the election plus one

² As part of the membership commitment to DermCAC, members agree that they will take an active role in all DermCAC issues, particularly when issues impact their Medicare Administrative Contractors.

Mohs Micrographic Surgery Committee (MMSC)

Reports to: Council on Government Affairs and Health Policy

Mission Statement:

The mission of the Mohs Micrographic Surgery Committee is to deliberate as a united voice of Mohs surgery organizations and provide guidance to the Academy on socioeconomic, education and research issues directly related to the provision of and patient access to Mohs Micrographic Surgery.

Time Commitment:

The Mohs Micrographic Surgery Committee (MMSC) meetings generally occur in conjunction with the Annual Meeting and/or AAD Innovation Academy. All other business is conducted by email or evening conference calls during the year.

Skill Set and Composition Max #11: (Board Certified Dermatologists)

- American Academy of Dermatology Association (Chair – must be a non-Mohs physician) *
 - American Academy of Dermatology Association (Deputy Chair-must be a non-Mohs physician)*
 - American Academy of Dermatology Association (2 members non-Mohs surgeon members) +
 - American College of Mohs Surgery (ACMS) (2 members)
 - American Society of Mohs Surgery (ASMS) (2 members)
 - American Society of Dermatologic Surgery (ASDS) (2 non-Mohs surgeon members)
 - Dermatopathology Committee – Ex-Officio member
- 2 Residents (*non-voting*) (*not included in count*)

Rationale for makeup of committee:

The committee is made up of a couple of physicians each from the ASDSA, the ACMS, and the ASMS, plus 4 non-Mohs surgeons who are the official AADA representatives. The chair and vice chair are always non-Mohs surgeons. The main purpose is to offer a way for dermatology, in a unified voice, to address Mohs related issues. This offers a forum for discussion of those issues, even if there is no agreement.

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member - three-year term

Note:

- * Chair and Deputy Chair should be un-conflicted
- + Without membership in the ACMS, ASMS or the ASDS

Patient Access and Payer Relations Committee (PAPRC)

Reports to: Council on Government Affairs and Health Policy

Mission Statement:

The mission of the Patient Access and Payer Relations Committee is to:

- 1) Educate insurers, employers and other entities on the value of dermatology and dermatologic care for patients.
- 2) Build and foster relationships with insurers, employers, and other stakeholders.
- 3) Ensure that coverage and payment policies reflect work performed and allow for the highest quality of dermatologic care for our patients.
- 4) Promote patient access to dermatology care and the opportunity for dermatologists to participate through open insurer networks.

Time Commitment:

The time commitment of the committee is considered light to moderate. The committee typically holds two in-person meetings a year in conjunction with the Annual Meeting and AAD Innovation Academy, with the bulk of the work being conducted by conference calls and email ballots. In addition, members are strongly encouraged to participate in one in-person meeting with a payer.

Skill Set:

Public Speaking and Presentation Skills, Relationship Building, Reimbursement Policy Experience, Coding and Experience

Composition: Max #15

1 Chair

1 Deputy Chair

10 At-large Members

3 Ex-officio Members (*voting*)

- 1 Representative, Dermatopathology Committee
- 1 Representative, Coding and Reimbursement Committee
- AADA RUC Advisor (3-year term and alternating between the two AADA representatives)

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – three-year term; Deputy Chair – three-year term; Member – three-year term; Resident-concurrent with residency

- *Representative serves a concurrent term on the Drug Pricing & Transparency Task Force*

Note:

- *Exception to the one-appointment rule*

Regulatory Policy Committee

Reports to: Council on Government Affairs and Health Policy

Mission Statement:

The mission of the Regulatory Policy Committee is to coordinate the Academy's activities related to all federal regulatory agencies whose activities have the potential to affect the prevention, diagnosis and treatment of diseases related to the skin, hair, and nails, primarily those within the Department of Health and Human Services (except Centers for Medicare and Medicaid Services). The Committee will monitor proposed regulations and coordinate Academy responses, serve as a resource to the agencies, promote the Academy's public health agenda, and ensure a safe and efficient practice environment for dermatologists and their patients.

Time Commitment:

Committee work is often conducted via e-mail or evening conference calls. In addition, the committee meets in conjunction with the Annual Meeting, and if necessary, the AAD Innovation Academy. Members are encouraged to participate in the Legislative Conference.

Skill Set:

The ideal member of this committee is:

- an active practitioner or academic with an interest in or experience with regulation of drugs
- biologics and/or devices used in the delivery of dermatologic care, or in the areas of risk communication/mitigation as it relates to drugs and devices
- Committee members are frequently asked for guidance in the development of comments on proposed regulations from the Food and Drug Administration, as well as input on the Academy's involvement with various FDA advisory panels
- Important to have a team player who responds quickly to email when important issues arise.
- Very complex and specialized focus

Composition: Max #14

1 Chair

1 Deputy Chair

11 At-large Members

1 Ex-officio Members (*voting*)

- Chair, Drug Pricing & Transparency Task Force

1 NCI Advisor Liaison - optional (*non-voting*) (*not included in count*)

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency

Drug Pricing and Transparency Task Force

Reports to: Regulatory Policy Committee

Mission Statement:

The mission of the Drug Pricing and Transparency Task Force is to investigate the dramatic increases in generic and specialty medications costs and use this information to advocate for both price transparency and for patients' access to affordable and effective generic, branded and specialty medications.

Time Commitment:

Two conference calls a year; in-person meeting at AAD Annual Meeting; regularly responding to requests for feedback on legislation or AAD initiatives regarding drug pricing.

Skill Set:

Policy and regulatory analysis skills and knowledge of drug pricing issues

Composition: Max #9

1 Chair

1 Deputy Chair

6 At-large Members

1 Ex-officio Members (*voting*)

- 1 Representative, Patient Access and Payer Relations Committee

1 Patient Group/Coalition for Skin Diseases Advisor (*non-voting*) (*not included in count*) (*3-year term*)

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency

- *Chair serves concurrent term on Regulatory Policy Committee*

Resource-Based Relative Value Scale and Current Procedural Terminology Committee

Reports to: Council on Government Affairs and Health Policy

Mission Statement:

The Resource-Based Relative Value Scale and Current Procedural Terminology (RUC/CPT) Committee is charged with overseeing the Academy and Association's involvement with all American Medical Association/Specialty Societies Relative Value Update Committee (RUC) and Current Procedural Terminology (CPT) Editorial Panel activities and is mandated to review and facilitate the activities, strategies and proposals of the RUC and the CPT teams, advise the RUC and the CPT teams, clarify responsibilities and offer solutions, and assist with team organization needs such as streamlining communications. It is also mandated to assist with the retention, recruitment, and succession of participants in the RUC/CPT processes, convey the Academy's concerns and feedback to the RUC and the CPT teams, and work with staff in ensuring that the support staff needs of the RUC and CPT teams are met. The RUC/CPT Committee strives to ensure that the Academy's membership is represented on the RUC and the CPT Editorial Panel.

Time Commitment: (Moderate to Extensive, depending on AMA RUC and AMA CPT agendas)

Committee has periodic conference calls to prepare for the RUC and CPT meetings, with most business handled by either email or evening conference calls. Each year there are 3 RUC meetings and 3 CPT Editorial Panel meetings. Dermatology specific workload and issues are identified prior to each meeting. An information report on non-embargoed items is submitted to the Council on a regular basis.

Skill Set:

To be eligible to serve on the RUC/CPT Committee, a member must be a current, active member of the RUC team or the CPT team or ex-officio member as outlined in the composition.

Composition:

1 Chair (rotate between a RUC team member and a CPT team member) *

1 Deputy Chair (rotate between a RUC team member and a CPT member) *

All RUC advisors/alternative advisors from derm societies

All CPT advisors/alternative advisors from derm societies

RUC Alternative Member

CPT Editorial Panel Member, if applicable

1 Ex-Officio Member (non-voting) †

*AADA representatives

†RUC member would be a non-voting member to ensure the position remains unconflicted with his RUC position

2 Residents (non-voting) **(only fill positions if residents have expressed an interest in RUC/CPT)

Resource-Based Relative Value Scale and Current Procedural Terminology Committee (continued)

Appointment Term:

Three-year term, eligible for renewal. Appointments are selected and approved through the standard appointment cycle. Appointment terms are renewable upon approval of Appointment Selection Committee and Board without normal one-year roll-off requirement.

- *AADA RUC representative and AADA CPT representative to serve concurrent term on Council on Government Affairs and Health Policy*
- *AADA RUC representative and AADA CPT representative to serve concurrent term on Health Care Finance Committee*

Note:

- Exception to the one-appointment rule

State Policy Committee

Reports to: Council on Government Affairs and Health Policy

Mission Statement:

The mission of the State Policy Committee is to serve as a sounding board for staff, the Council chair, and Academy officers on state issues requiring thoughtful but timely analysis. This committee will develop member expertise and leadership on state issues pertinent to dermatology and provide key input to staff in developing positions and strategy. This committee will assist staff in monitoring trends and in quickly responding to rapidly changing events at the state level. This committee would be the first line in evaluating requests from state dermatology societies for Academy funds to be used for advocacy efforts (the State Advocacy Funds).

Time Commitment: (Moderate – January through December is the busiest time)

Majority of the committee's business will be conducted via e-mail and evenings conference call. Any necessary in-person meetings will be scheduled in conjunction with the Annual Meeting and AAD Innovation Academy. State legislatures often move at a rapid pace, members should be accessible by email and be able to respond quickly to requests for action.

Skill Set:

Members of this committee should be active practitioners or academics with a keen interest in state advocacy efforts on health care policy, including indoor tanning, scope of practice, truth in advertising, access to pharmaceuticals, and insurance issues (e.g.-network adequacy)

Composition: Max #10

1 Chair

1 Deputy Chair

8 At-large Members

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency

- *Chair serves concurrent term on the State Society Relationships Committee*

Council on Member Services

Reports to: Academy and Association Board of Directors

Mission Statement:

The mission of the Council on Member Services is to coordinate activities that provide service to all segments of membership. It serves to ensure that the Academy is meeting the current and future needs of members of all ages, stages of practice, membership categories and countries of residence. It also oversees programs to preserve the history of the Academy and the specialty and recognize those who serve the Academy and the specialty in leadership and volunteer capacities.

Time Commitment: (Light to Moderate)

Members should expect to attend the Council meeting which is held in conjunction with the Annual Meeting and AAD Innovation Academy, if necessary. All other business will be handled by evening conference calls and/or email.

Skill Set:

The Council on Member Services is chaired by a physician with experience serving on Task Forces and Committees under the Council. Other members of the Council include Chairs of the Council's constituent Committees.

Composition: Max #9

1 Chair

1 Deputy Chair

5 Ex-officio Members (*voting*)

- Chair, Diversity Committee
- Chair, International Affairs Committee
- Chair, Membership Committee
- Chair, Residents/Fellows Committee
- Chair, Young Physicians Committee

3 At-large Members (**2 At-large Member when a Deputy Chair**)

1 Ex-officio Member (*non-voting*) (*not included in count*)

- Board of Director (BOD Liaison)

1 Historian (*non-voting*) (*not included in count*)

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – four-year term; Deputy Chair – two-year term (**appointed in third year of Chair term**); Member – three-year term; Resident-concurrent with residency.

- *Representative serves concurrent term on Council on Practice Management*

Historian – three-year term; one renewable term

Diversity Committee

Reports to: Council on Member Services

Mission Statement:

The mission of the Diversity Committee is to promote cultural competence diversity awareness within the specialty of dermatology and increase diversity within the Academy among members, leaders, volunteers, and speakers.

Time Commitment: (Moderate to Extensive)

Committee meets in conjunction with the Annual Meeting and holds 5-7 evening conference calls throughout the year. An additional three hours per year are required to review online student applications for the Diversity Mentorship Program. The review process is concentrated in the 1st quarter, generally before the annual meeting. Additionally, there will be anywhere from five to ten hours spent on task assignments as it relates to the Diversity, Equity, and Inclusion 3-year plan.

Skill Set:

The Diversity Committee has focused on its activities on increasing the number of practicing dermatologists who are under-represented minorities to address access to dermatologic care and health care disparities among minority populations. Key program goals include promote and facilitate diversity, equity, and inclusion within the AAD, ensure dermatologic education and research encompasses health disparities and skin of color, and advocates for minority representation in research, increase the number of practicing dermatologists who are underrepresented minorities (URM) and provide leadership and professional development programming and expand Academy's advocacy priorities to address health inequities. Additionally, engage AAD members (especially faculty) in championing diversity in the specialty.

Composition: Max #11

1 Chair

1 Deputy Chair

9 At-large Members

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency

- *Chair serves concurrent term on Council on Member Services*

Intersociety Diversity Task Force

Reports to: Diversity Committee

Mission Statement:

The mission of the Intersociety Diversity Task Force is to increase the number of under-represented minorities in dermatology residencies and promote cultural competency by sharing organizational objectives and initiatives that identify where individual expertise is most effectively focused and where joint/coordinated efforts are appropriate.

Time Commitment: Light to Moderate

Members should expect to attend a Task Force meeting held in conjunction with the Annual Meeting, as well as 3-4 conference calls within a year. Representatives from sister societies will be expected to liaison with their respective organizations on funding, and cooperative efforts.

Composition: Max #13

1 Chair

1 Deputy Chair

1 At-large AAD Members (strongly consider one from the AAD LGBTQ/SGM Expert Resource Group)

3 Ex-officio Members

- Chair, Diversity Committee
- Deputy Chair, Diversity Committee
- Chair, Access to Dermatological Care Committee

7 AAD Members – representatives from the following societies

- American Society for Dermatology Surgery
- Association of Professors of Dermatology
- Dermatology Foundation
- Skin of Color Society
- Society of Investigative Dermatology
- National Medical Association: Derm Section
- Women's Dermatologic Society

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident concurrent with residency

The societies will be asked to identify two-three AAD members to represent them on this task force. The Appointment Selection Committee will choose from those recommendations which member to put forward to the Board for approval.

All members of this task force are required to be members of the AAD. Staff liaisons from the six societies will be included on calls/meetings.

International Affairs Committee

Reports to: Council on Member Services

Mission Statement:

The mission of the Committee on International Affairs is to promote the interchange of information, skills, concepts, understanding, and friendship between the American Academy of Dermatology and its members with dermatology communities and dermatologists throughout the rest of the world. It also selects US/Canadian residents and fellows to receive scholarships provided by certain international dermatologic societies to attend their annual meetings. The Committee monitors the scholarship programs from foreign societies and services as an ombudsman for international members.

Time Commitment: (Light to Moderate)

Concentrated Involvement - September/October reviewing applications for the Annual Meeting Registration Scholarship (for international attendees) and the International Travel Grant Scholarship (for US and Canadian residents).

Committee meets in-person in conjunction with the Annual Meeting, all other correspondence done via email. Members must be available to respond in a timely manner. Approximately 10-15 hours per year to review online scholarship applications.

Skill Set:

Members should be familiar with international dermatology issues and the international dermatologic community. Members promote the interchange of information between the Academy, its members, and dermatologists throughout the world. Members participate in the online review and selection process for US/Canadian residents and fellows to receive scholarships to attend international meetings. The committee also administers scholarship programs for international dermatologists to attend the Annual Meeting. Must be computer efficient.

Composition: Max #16

1 Chair

1 Deputy Chair

12 At-large Members

3 – USA and Canada

3 – Europe and Oceania

2 – South America; Central America and Caribbean (*Americas*)

1 – Africa

1 – Mid East

2 – North, Central and South Asia (*NCS Asia*)

2 Ex-officio Members (*voting*)

- Chair, Education and Volunteers Abroad Committee
- Chair, World Congress Fund Review Task Force

1 Ex-officio Member (*non-voting*) (*not included in count*)

- International Board Observer

2 Residents (*non-voting*) (*not included in count*)

International Affairs Committee (continued)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency

- *Chair serves concurrent term on Council on Member Services and Scientific Assembly Committee*

AMERICAS*	EUROPE & OCEANIA	NORTH, CENTRAL & SOUTH ASIA	AFRICA
South America	Albania	Bangladesh	Algeria
Argentina	Australia	Brunei	Burkina Faso
Bolivia	Austria	China	Egypt
Brazil	Belgium	Hong Kong	Ethiopia
Chile	Bosnia	India	Ghana
Colombia	Bulgaria	Indonesia	Ivory Coast
Ecuador	Croatia	Japan	Kenya
Guyana	Cyprus	Korea	Libya
Paraguay	Czech Republic	Malaysia	Mauritius
Peru	Denmark	Maldives	Morocco
Suriname	England	Myanmar	Nigeria
Uruguay	Finland	Nepal	South Africa
Venezuela	France	Philippines	Sudan
	Georgia	Singapore	Tanzania
Central America	Germany	Sri Lanka	Tunisia
Belize	Greece	Taiwan	Zimbabwe
Costa Rica	Hungary	Thailand	
El Salvador	Iceland	Verma	
Guatemala	Ireland	Viet Nam	
Honduras	Italy	Yemen	
Mexico	Kosovo		
Nicaragua	Latvia	Mid-East	
	Luxembourg	Bahrain	
Caribbean	Macedonia	Iran	
Aruba	Malta	Iraq	
Bahamas	Montenegro	Israel	
Barbados	Netherlands	Jordan	
Cayman Islands	New Zealand	Kuwait	
	Northern Ireland	Lebanon	
Dominican Republic	Norway	Oman	
Jamaica	Poland	Pakistan	
Panama	Portugal	Qatar	
St. Lucia	Romania	Saudi Arabia	
St. Vincent & the Grenadines	Russia	Syria	
Trinidad	Scotland	United Arab Emirates	
West Indies	Serbia		
	Slovak Republic		
	Slovenia		
	Spain		
*(Does not include USA & Canada)	Sweden		
	Switzerland		
	Turkey		
	Ukraine		
	United Kingdom		
	Wales		

World Congress Fund Review Task Force

Reports to: International Affairs Committee

Mission Statement:

The mission of the World Congress Fund Review Task Force is to review and set policies and awarding priorities for scholarships, grants, and other appropriate international educational activities from the interest generated from the endowment established with the balance of funds from the 18th World Congress of Dermatology.

Time Commitment: (Light to Moderate) Extensive August/October to review applications for the annual Strauss & Katz World Fund Scholarship and the International Investigative Dermatology Travel Grant (every five years).

Approximately 5-15 hours per year to review abstracts for scholarships online, plus one in-person Committee meeting in conjunction with the Annual Meeting. All other correspondence handled via email, must be able to respond in a timely manner.

Skill Set:

Members should be familiar with international dermatology issues and the international dermatologic community, particularly in developing countries. The Task Force reviews, sets policies, and awards priorities for scholarships and grants supported by the World Congress Fund. Members participate in the online abstract review and selection process for international scholarship awardees to attend the Annual Meeting. Must be computer efficient.

Composition: Max #8

1 Chair

1 Deputy Chair

5 At-large Members

1 At-large International Member

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident concurrent with residency

- *Chair serves concurrent term on the International Affairs Committee*

STRAUSS & KATZ WORLD CONGRESS FUND SCHOLARSHIP OF THE AMERICAN ACADEMY OF DERMATOLOGY

In 1992, the 18th World Congress of Dermatology (WCD)* was hosted by the United States in New York City, under the auspices of the International League of Dermatological Societies. Dr. John S. Strauss served as WCD President and Dr. Stephen I. Katz served as WCD Secretary-General. The commitment of the American Academy of Dermatology (AAD), the American Dermatological Association, the American Society of Dermatopathology, the American Society of Dermatological Surgery, and the Association of Professors of Dermatology, plus the tireless efforts of the 18th WCD organizing committee and the outstanding program planning committee of the International Committee of Dermatology[^], all contributed greatly to create an extraordinary scientific and educational event, which benefited both patients and the specialty. More than 7,000 participants, representing over one hundred countries, attended the Congress.

One of the goals of Congress organizers was to foster and facilitate the participation of young international dermatologists. More than 150 dermatologists from thirty-eight low-income countries, as well as 113 dermatologists from fourteen higher-income countries, were provided scholarships to attend the meeting. The generous support from industry provided the foundation for these scholarships, as well as for parts of the educational program.

Although the organizers did not set out to make a profit for the meeting, after all of the expenses were accounted for, there was a surplus of income over expenses in the amount of \$1.3 million. Drs. Strauss and Katz believed that the best organization to hold and disperse these monies in the form of scholarships was the AAD. The AAD agreed and created an endowment fund with Drs. Strauss and Katz serving *ad infinitum* on the World Congress Fund Review Task Force. The interest, but not the corpus, was to be used to fund three types of scholarships for: (1) young and early-stage dermatologists from countries identified by the World Bank as low-income to attend the annual AAD meetings, thus perpetuating the core value of the WCD; (2) young and early-stage dermatologists. Applicants must be within five years of completion of dermatology residency training at the time of the meeting from the United States and Canada to attend the WCD and present their research findings (every four years); and (3) early-stage investigators to attend the International Investigative Dermatology Meetings** (currently every five years).

On March 20, 2015, at the AAD Annual Meeting in San Francisco, the World Congress World Review Task Force, in order to honor Drs. Strauss and Katz, decided to change the Poster Abstract Scholarship to the Strauss and Katz World Congress Fund Scholarship. Annually, a budget for the following year is put forth by the AAD's Chief Financial Officer (currently Steve Debnar) and approved by the Task Force such that the number of scholarships reflects the available monies. The Fund is meant to remain in perpetuity and via its scholarships enable patients worldwide suffering from skin diseases to benefit from the latest advances in our specialty.

*Previously referred to as the International Congress of Dermatology.

[^]International Committee of Dermatology was the previous name of the board of the International League of Dermatological Societies.

**Originally referred to as Tricontinental Meeting and in 2023 name changed to International Societies for Investigative Dermatology.

Membership Committee

Reports to: Council on Member Services

Mission Statement:

The mission of the Membership Committee is to ensure the integrity, consistency, and high standards of all membership categories by reviewing and evaluating all properly filed applications for membership and by developing recommendations as needed for the Board of Directors regarding membership applications, category benefits and requirements, and other policy changes requiring modification of Bylaw amendments, Administrative Regulations and other policy documents.

Time Commitment: (Light)

Includes one in-person Committee meeting in conjunction with the Annual Meeting, and 2-6 evening conference calls per year, depending on issues that may arise. Review agenda and materials for meetings and conference calls which includes review of membership applications via an online portal, as well as reviewing Academy policies and bylaws.

Skill Set:

This committee is comprised of primarily Fellows and Associates who have been Academy members for a minimum of five years and have a broad understanding of the value of membership in the Academy and the policies related to membership. This committee reviews and evaluates applications for membership when there are questions as to whether they meet criteria for membership. This Committee develops recommendations for the Board of Directors regarding membership categories, Bylaw amendments and membership policy changes, applications, and administrative regulations.

Composition: Max #12

- 1 Chair
- 1 Deputy Chair
- 7 At-large members
- 1 At-large Canadian member
- 2 Ex-officio Members (*voting*)
 - Vice President
 - International Board Observer
- 2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident concurrent with residency

Residents/Fellows Committee

Reports to: Council on Member Services

Mission Statement:

The Resident/Fellows Committee supports the interests of and addresses issues of concern to residents and fellows in training during post graduate education. It promotes effective communication and action toward these ends between individuals, training programs, graduate medical education societies, and the Academy.

Time Commitment: (Light to Moderate)

Includes one in-person Committee meeting in conjunction with the Annual Meeting and 2-3 evening conference calls per year (may vary based on workgroup involvement). Most business is conducted via email.

Skill Set:

The Residents/Fellows Committee (RFC) is comprised of residents or fellows in training who serve up to two-year terms (depending on when they complete training). Members should be interested in developing their leadership skills and becoming involved in organized medicine. The RFC votes for the RFC chair and presents their recommendation to the Appointment Selection Committee during the appointment process. RFC members address issues of educational opportunities for residents and tools for transition to the workforce. The RFC also offers committee members the opportunity to chair or serve on additional workgroups that report to the RFC. RFC members have the opportunity to submit articles for publication in *Directions in Residency*. First and second year residents are preferred to provide continuity.

Composition: Max #13 (geographic diversity desired)

1 Chair

9 At-large Members (residents)

1 At-large Member serving as an AMA Residents/Fellows Delegate (Term July 1 – June 30)

2 Ex-officio Member (*voting*)

- Chair, Young Physicians Committee
- Immediate Past Chair

1 Ex-officio Member (*non-voting*) (*not included in count*)

- Board of Director (BOD Liaison)

Appointment Term:

Chair – one-year term in conjunction with residency/fellowship; Resident Member term based on residency year.

RFS Delegate – Call for volunteers to AAD residents; RFC reviews submissions and votes on their recommendation to send to the Board of Directors for their approval (DC staff manages the delegates and lets RFC staff liaison when seat needs to be filled)

Residents/Fellows Committee (continued)

- *Chair must have the support of his/her residency program director to take time to attend four Board meetings per year; must have been a sitting member of the committee; attended at least one committee meeting and have at least one year remaining on their term.*
- *Chair serves as Resident Observer on the Board of Directors*
- *Chair serves concurrent term on Young Physicians Committee*

Note:

- Exception to the one-appointment rule
- Committee elects the Chair and presents their recommendation to the Appointment Selection Committee during the appointment process.

American Medical Association Resident Delegate Selection Process - Timeline

American Medical Association Resident Delegate term ends upon completion of Residency

1. Members of the Residents/Fellows Committee (RFC) and residents at large will be notified by email that a representative slot is open.
2. Residents interested in this position will submit a brief statement of interest.
3. The Residents/Fellows Committee will vote via email ballot and present this individual as a strong recommendation to the President for consideration.
4. The Residents/Fellows Committee also recommends that at least one delegate be a member of the Residents/Fellows Committee.
5. The term will begin with the November American Medical Association (AMA) meeting and conclude upon completion of residency

Timeline

March 1-30	Notify all residents that American Medical Association Delegate slot is open
March 30	Deadline to submit statement of interest in delegate position.
April 1-5	Staff compiles submissions and sends to Residents/Fellows Committee for review and voting.
April 5-19	Residents/Fellows Committee members vote via email ballot to select incoming delegate.
April 20-25	Voting results tallied; selection announced to Residents/Fellows Committee
May 1	Residents/Fellows Committee selection presented for review at June Executive Committee Call.
July 1	Resident is notified via email of selection.

Young Physicians Committee

Reports to: Council on Member Services

Mission Statement:

The Young Physicians Committee represents and supports the interests of physicians 40 and under or within eight years of completion of residency training by promoting their engagement in Academy programs and by fostering their personal and professional development in preparation for leadership roles in organized medicine and in their communities.

Time Commitment: (Moderate)

Includes two in-person Committee meetings in conjunction with the Annual Meeting and AAD Innovation Academy, and 2-3 evening conference calls per year. Most business is conducted via email; however, it is important that committee members can attend both in-person meetings.

Skill Set:

Young physicians are defined as those up to age 40 or within eight years of completion of residency. The Young Physicians Committee (YPC) typically seeks candidates who are interested in continuing/expanding their leadership role within organized medicine. YPC members address issues of educational and leadership opportunities for young physicians and can submit articles for publication in *Young Physician Focus*. The YPC also offers committee members the opportunity to chair or serve on additional workgroups that report to the YPC. YPC members select the Young Physician Board Observer to the Academy Board of Directors.

Composition: Max #15 (geographic diversity desired)

1 Chair

1 Deputy Chair

12 At-large Members

1 Ex-officio Member (*voting*)

- Chair, Resident/Fellows Committee (also serves as resident member)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term

- *Chair serves concurrent term as the Young Physician Board Observer*
- *Chair serves concurrent term on Residents/Fellows Committee*
- *Chair serves concurrent term on the Council on Member Services*
- *Representative to serve concurrent term on Corporate Relations Committee*
- *Representative to serve concurrent term on Scientific Assembly Committee (See specifics under SAC composition – Council on Education)*

Note:

- Exception to the one-appointment rule

Council on Practice Management

Reports to Academy Board of Directors

Mission Statement:

The mission of the Council on Practice Management is to provide leadership, oversight, and coordination in preparing dermatologists for the evolving practice environment through the development of dermatology-specific services and solutions that are the leading source to help dermatologists and their staff in any practice setting thrive personally and professionally at every career stage.

Time Commitment: (Light) (Estimated 20-30 hours)

Council meeting held in conjunction with the Annual meeting and participate in 3-6 evening conference calls per year. Members should expect to periodically review and provide input/comments on proposed rules/legislation that impact dermatology practice and/or practice management-related content.

Skill Set:

Members who have an interest in, and understanding of, the changing practice environment and how it affects dermatology practice—and dermatologists-- in all different settings.

- Understanding of the strategic priorities of the Academy
- In-depth knowledge of the external environmental issues (e.g., payment reform, regulation, administrative requirements, etc.) as they relate to dermatology practice.
- In-depth knowledge of dermatology practice in various settings (e.g., private practice, multispecialty group practice, academic practice, etc.) and the personal and professional challenges faced by dermatologists and their staff in these settings.
- Experience in providing strategic direction, management, collaboration, and team building.
- Leadership experience
- Ability to facilitate productive conflict resolution and consensus building.
- Understanding of Board, Council, Committee and Task Forces and member inter-relationships
- Meeting management and facilitation skills

Council on Practice Management (continued)

Composition: Max #11

1 Chair

1 Deputy Chair

1 At-large Member in years with no deputy chair – 2-year term

8 Ex-officio Members (*voting*)

- Chair, Health IT Committee
- Chair, Practice Management Committee
- Chair, Coding and Reimbursement Committee
- Chair, Teledermatology Committee
- Council on Education Representative
- Council on Member Services Representative
- Council on Government Affairs and Health Policy Representative
- Council on Science and Research Representative

1 Young Physician (age 40 and under or who has been out of residency/fellowship no more than eight years)

1 Ex-officio Member (*non-voting*) (*not included in count*)

- Board of Director (BOD Liaison)

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – four-year term; Deputy Chair – two-year term (appointed in third year of Chair term); Ex-officio Members concurrent with appointment term; Resident-concurrent with residency.

Coding and Reimbursement Committee

Reports to Council on Practice Management

Mission:

The mission of the Coding and Reimbursement Committee (CRC) is to serve as a resource for AAD members with questions about correct coding or payor coding interpretation as well as Medicare carrier coding and reimbursement Local Coverage Determination (LCD) policies. The CRC interacts with payors on behalf of members where desired and appropriate. It also leads educational efforts on coding with the Academy. The CRC encourages representation and participation by dermatologists on those government and private committees and organizations to provide the greatest input for dermatologists.

Time Commitment: (Moderate)

The Committee meets in conjunction with the Annual Meeting, and if necessary, at AAD Innovation Academy. All other communications handled by email or 4-6 evening conference calls per year; approximately 50-60 hours per year but may vary depending on volume and intensity of coding and reimbursement issues to be addressed each year. Members must be able to respond in a timely manner, depending on coding and reimbursement issues.

Members will:

- Review comment letters
- Review coding scenarios
- Provide guidance on member education on coding and reimbursement

Skill Set:

Active practitioner with a minimum of 5 years clinical experience, with demonstrated familiarity of American Medical Association (AMA) Current Procedural Terminology (CPT®) Coding system and process, as well as ICD-10 disease classification coding system. In addition, an active interest in coding and related policy development, previous Academy task force or committee experience preferred; prefer member that also has an active interest in government payment policy and methodology. Good understanding of the factors impacting physician reimbursement as the result of payer use of resource-based/relative value systems. Committee members are expected to provide input to Association representatives to the AMA CPT Advisory Committee as well as the AMA Practice Expense Review Committee and Relative Value Update System Committee on issues directly impacting dermatology reimbursement.

Composition: Max #15

1 Chair

1 Deputy Chair

13 At-large Members

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency

Practice Management Committee

Reports to Council on Practice Management

Mission:

The mission of the Practice Management Committee 1 is to prepare dermatologists for the constantly changing practice environment by providing members with timely and useful tools and resources to optimize efficiency, understand new practice models, and implement sound management strategies in order to operate a successful practice.

Time Commitment: (Light to Moderate)

Committee meeting held in conjunction with the Annual meeting and participate in approximately 3-4 evening conference calls per year. Members should expect to periodically review and provide input/comments on proposed rules/legislation that impact dermatology practice and/or practice management-related content. Estimated 20-30 hours.

Skill Set:

Members who have an interest in, and understanding of, the changing practice environment and how it affects dermatology practice—and dermatologists-- in all different settings.

- In-depth knowledge of the external environmental issues (e.g., payment reform, regulation, administrative requirements, emerging practice models etc.) as they relate to dermatology practice.
- In-depth knowledge of dermatology practice in various settings (e.g., private practice, multispecialty group practice, academic practice, etc.) and the personal and professional challenges faced by dermatologists and their staff in these settings.
- Leadership experience
- Ability to facilitate productive conflict resolution and consensus building
- Understanding of Board, Council, Committee and Task Forces and member interrelationships
- Meeting management and facilitation skills

Composition: Max #11

1 Chair

1 Deputy Chair

9 At-large Members

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident – concurrent with residency.

Teledermatology Committee

Reports to Council on Practice Management

Mission:

The mission of the Teledermatology Committee is to prepare dermatologists for the constantly changing practice environment by providing members with timely and useful tools and resources to optimize efficiency, understand new practice models, and implement sound management strategies in order to operate a successful practice.

Time Commitment: (Moderate)

Committee meeting held in conjunction with the Annual meeting and participate in 3-6 evening conference calls per year. Members should expect to periodically review and provide input/comments on proposed telemedicine-related rules/legislation that impact dermatology practice and/or practice management-related content. Estimated 20 hours.

Skill Set:

- Dermatologist who has worked for a minimum of 3-5 years in a clinical or academic setting with patients.
- Sees the potential for telemedicine to improve patient care; understands emerging trends in telemedicine, and the factors associated with adoption of telemedicine into practice.
- Has experience working with the payment and regulatory environment related to telemedicine; understands the external landscape related to telemedicine/tele dermatology.
- Interested in the creation of educational resource for members on these topics.
- Experience in providing strategic direction, management, collaboration and team building.
- Leadership experience
- Ability to facilitate productive conflict resolution and consensus building.
- Understanding of Board, Council, Committee and Task Forces and member inter-relationships
- Meeting management and facilitation skills

Composition: Max #9

1 Chair

1 Deputy Chair

1 Ex-officio Member (*voting*)

- Council on GAHP Representative

6 At-large Members

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency

Health IT Committee

Reports to: Council on Practice Management

Mission:

The mission of the Health It Committee is to prepare dermatologists for the changing practice environment and the shift to value-based care, assist Academy members in utilizing telemedicine and other emerging technologies to improve practice quality, efficiency, and value of care.

Time Commitment: (Moderate)

Committee meeting held in conjunction with the Annual meeting and participate in 3-6 evening conference calls per year. Members should expect to periodically review and provide input/comments on proposed HIT-related rules/legislation that impact dermatology practice and/or practice management-related content. Estimated 20-30 hours.

Skills Set:

- Dermatologist who has worked for a minimum of 3-5 years in a clinical or academic setting with patients.
- Sees the potential for digital health tools to improve patient care especially data registries; understands emerging digital tools (e.g., those that can help with utilizing clinical data, communication, sharing electronic clinical data for consults and referrals, telemedicine, etc.), and the factors associated with adoption of these tools into practice.
- Understands the payment and regulatory environment related to digital health tools; understands the external landscape related to digital health tools.
- Experience in providing strategic direction, management, collaboration and team building
- Leadership experience
- Ability to facilitate productive conflict resolution and consensus building
- Understanding of Board, Council, Committee and Task Forces and member inter-relationships
- Meeting management and facilitation skills

Composition: Max #11

1 Chair

1 Deputy Chair

4 Ex-officio Members (*voting*)

- Congressional Policy Committee Representative
- Augmented Intelligence Committee Chair
- AADA RUC Representative from RUC-CPT Committee
- AADA CPT Representative from RUC-CPT Committee

5 At-large Members

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident – concurrent with residency.

Council on Science & Research

Reports to: Academy Board of Directors

Mission Statement:

The mission of the Council on Science and Research is to promote, apply, and communicate the clinical science and research of dermatology to improve the quality of patient care.

Time Commitment: (Moderate)

Council meeting held in conjunction with the Annual meeting, and participate in 4-6 evening conference calls per year, with additional periodic requests for feedback/action via email. Estimated 15-18 hours.

Skill Set:

Members who have an interest in, and experience with, dermatologic science and clinical research, preferably with publications in a professional journal. Prefer candidates that have additional knowledge and/or experience with the application of available science to the development of clinical recommendations, performance measures, and/or quality improvement activities.

- Understanding of the strategic priorities of the Academy
- In-depth knowledge of the science, research, and quality issues of dermatology
- Experience in providing strategic direction, management, collaboration, and team building
- Experience in leading research and clinical teams
- Ability to facilitate productive conflict resolution and consensus building
- Understanding of Board, Council, Committee and Task Forces and member inter-relationships
- Skills in meeting management and facilitation

Composition: Max #13

1 Chair

1 Deputy Chair

6 Ex-officio Members (*voting*)

- Chair, Appropriate Use Criteria (AUC) Committee
- Chair, Augmented Intelligence Committee
- Chair, Clinical Guidelines Committee
- Chair, Patient Advocate Task Force
- Chair, Patient Safety and Quality Committee
- Chair, Performance Measurement Committee

3 At-large Members (**2 At-large members in years when Deputy Chair appointed**)

1 Rep from Society of Investigative Dermatology (3-year term)

1 Rep from Dermatology Foundation (3-year term)

1 Ex-officio Member (*non-voting*) (*not included in count*)

- Board of Director (BOD Liaison)

2 Residents (*non-voting*) (*not included in count*)

Council on Science & Research (continued)

Appointment Term:

Chair – four-year term; Deputy Chair – two-year term (appointed in third year of Chair term); Member – three-year term; Ex-officio concurrent with appointment; Resident-concurrent with residency

Appropriate Use Criteria (AUC) Committee

Reports to: Council on Science and Research

Mission Statement:

The mission of the Appropriate Use Criteria Committee is to promote and advance the development of Appropriate Use Criteria related to diagnostic, prognostic and therapeutic options in the assessment and treatment of dermatologic conditions and when appropriate, work in concert with the expert resource groups.

Time Commitment: (Light)

Members should expect to attend the Committee meeting in conjunction with the Annual Meeting and spend approximately 5-7 hours per year in additional conference calls and email requests for feedback and/or action, but this may vary depending on the number of AUC and related projects produced per year. Select committee members may also serve in an oversight capacity for assigned AUC workgroups as necessary which may include one in-person meeting and additional conference calls.

Skill Set:

Dermatologist who has worked for a minimum of 3-5 years in a clinical or academic setting with patients; familiarity with evidence-based medicine, policy development, previous Academy task force or committee experience preferred; prefer candidate that has published in a professional journal. Academy AUCs offer the unique opportunity to consider the combination of scientific literature and clinical experience to determine the appropriate utilization of dermatologic procedures, tests or therapies in the diagnosis and care of patients.

Composition: Max #11

1 Chair

1 Deputy Chair

4 Ex-officio Members (*voting*)

- Health Care Finance Committee - 2 Representatives
- Performance Measurement Committee - 1 Representative
- Clinical Guidelines Committee - 1 Representative

5 At-large Members

2 Residents (non-voting - not included in count)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term

- *Chair serves concurrent term on the Council and Science and Research*

Note:

CCTF chairs would make recommendations regarding suggested liaisons; approval of appointment would progress through the annual appointment process. The 2 representatives from the Health Care Finance Committee would cover both the private payer perspectives and coding issues from the Resource-Based Relative Value Scale (RUC) process.

Augmented Intelligence Committee

Reports: Council on Science and Research

Mission Statement:

The mission of the Augmented Intelligence Committee will undertake the work of positioning the AADA as the leading source to advocate and engage with efforts in augmented intelligence (Aul) and dermatology as the field continues to develop. The committee will spearhead efforts and initiatives to 1) communicate with, educate, and engage AAD members across a variety of forums regarding the implementation of Aul in practice; 2) collaborate with technology partners and regulators to influence the efficient development and effective deployment of human centered Aul tools and systems; and 3) facilitate the advancement of research and commercial efforts in the field.

Time Commitment: (Moderate)

Committee meeting held in conjunction with the Annual Meeting and participate in 4-6 evening conference calls per year. Estimated 20-30 hours.

Skill Set:

- An interest in the development and utilization of AI, Aul, and ML in clinical practice
- An interest in the potential clinical, social, and economic impact these applications may have on clinical practice.
- A basic familiarity with how these technologies are developed and/or deployed
- The ability to translate technical specifications into policy statements, clinical guidelines and/or reporting standards.

Composition: Max #9

1 Chair

1 Deputy Chair

2 Ex-Officio Members:

- Chair, Teledermatology Committee
- Representative, Council on Government Affairs and Health Policy

5 At-large Members

2 Residents (non-voting – not included in count)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term; Resident-concurrent with residency

- *Chair serves concurrent term on the Council and Science and Research and the Health IT Committee*

Clinical Guidelines Committee

Reports to: Council on Science and Research

Mission Statement:

The mission of the Clinical Guidelines Committee is to promote and advance the development of evidence-based documents such as clinical practice guidelines related to the prevention, diagnosis, and treatment of dermatologic conditions and to support the Council on Education and Continuing Certification in the dissemination, and implementation of these guidelines.

Time Commitment: (Moderate to Extensive)

Members should expect to attend the Committee meeting in conjunction with the Annual Meeting and spend approximately 15-25 hours per year in additional conference calls and email requests for feedback and/or action, which may vary depending on the number of research requests, project and/or guidelines produced per year. Select committee members may also serve in oversight capacity for assigned workgroups as necessary which may include in-person meeting(s) of the workgroup and additional conference calls.

Skill Set:

Dermatologist who has completed residency and worked for a minimum of 3-5 years in a clinical or academic setting with patients, familiarity with evidence-based medicine, guidelines of care, policy development, previous Academy task force or committee experience preferred; prefer candidate with GRADE Methodology experience; prefer candidate that has published in a professional journal; team player that is flexible and able to devote expert consult as needed for multiple guidelines, projects and requests throughout the year. Academy guidelines of care offer the unique opportunity to consider emerging scientific literature and identify clinical recommendations as a supporting author for Board approved topics. In addition, there may be opportunities to participate in the development of new evidence-based product lines that depend on clinical expertise and balance in representing the Academy to members and the public.

Composition: Max #11

1 Chair

1 Deputy Chair

9 At-large Members

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term

- *Chair serves concurrent term on the Council on Science and Research*
- *Select committee representatives also serve a concurrent term on Education Research Committee and the Appropriate Use Criteria Committee*
- *JAAD editor and deputy editor may not serve on the Clinical Guidelines Committee to avoid conflicts when guidelines are submitted to the JAAD for publication.*

Emerging Diseases Task Force

Reports to: Clinical Guidelines Committee

Mission Statement:

The Emerging Diseases Task Force is charged with evaluating and responding to emerging diseases impacting the dermatologic community, developing member and public educational content and resources when appropriate, and liaising with CDC to further elevate dermatology's profile in the house of medicine.

Time Commitment:

Meet in person at the Annual Meeting and at other AADA meetings, as appropriate, along with conference calls to be scheduled on an as-needed basis.

Skill Set:

Members who have experience with dermatologic science and clinical research, particularly in the realm of viral, bacterial, and fungal infectious disease outbreaks. Prefer candidates who have training/additional knowledge and/or expertise/experience with infectious diseases, sexually transmitted infections, public health messaging, epidemiology, and drug resistance issues. Candidates will have facility in the application of available science to the rapid development of member- and public-facing scientific messaging.

- Involvement in public health initiatives related to infectious diseases
- Specialized knowledge in emerging infectious diseases impacting the skin
- Understanding of global health issues and the impact of infectious diseases on diverse populations
- Knowledge of epidemiological principles related to infectious skin diseases
- Awareness of outbreak investigation and control measures
- Experience in conducting research related to dermatology and infectious diseases
- Scientific publications on infectious and emerging diseases in a professional journal

Composition: Max #9

1 Chair

1 Deputy Chair

5 At-large members

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term

Patient Safety and Quality Committee

Reports to: Council on Science and Research

Mission Statement:

The mission of the Patient Safety and Quality Committee is to be responsible for Academy activities related to creating a culture of patient safety and continuous measurement and improvement in dermatology.

Time Commitment: (Moderate)

The Committee's in-person meeting is held in conjunction with AAD's Annual Meeting. Members will also participate in 2-3 evening conference calls per year, with additional periodic requests for feedback/action via email. Members are requested to participate in committee workgroups or projects and additional travel may be required.

Skill Set:

- Understanding the environment as it relates to quality improvement and patient safety.
- Interest in using science (research, data) to drive improvements in care processes and patient safety for the specialty and create products to assist members in implementing improvement initiatives to demonstrate the value of dermatologic care and improve clinical care.
- Familiarity with or interest in quality improvement and/or measurement science.

Composition: Max #9

1 Chair

1 Deputy Chair

7 At-large members

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term

- *Chair serves concurrent term on Council on Science and Research*
- *Representative serves a concurrent term on the Education Research Committee*

Performance Measurement Committee

Reports to: Council on Science and Research

Mission Statement:

The mission of the Performance Measurement Committee is to the extent possible, to identify gaps in care, recommend topics for evidence-based clinical guidelines for areas where measures are needed, develop quality performance measures for dermatology, promote their implementation in various internal and external programs, and evaluate their effectiveness in improving care. The committee will also stay abreast of quality and patient safety-related developments within the National Quality Forum (NQF), Physician Consortium for Performance Improvement (PCPI), the Agency for Healthcare Research and Quality (AHRQ), Centers for Medicare and Medicaid Services (CMS), private carriers, and others.

Time Commitment: (Moderate to Extensive)

The Committee's in-person meeting held in conjunction with AAD's Annual Meeting. Members will participate in 3-4 evening conference calls per year, with additional periodic requests for feedback/action via email. Members are requested to participate in committee workgroups or projects and additional travel may be required. 20-30 hours for review and development of quality measures.

Skill Set:

- Understanding the environment as it relates to the development and implementation of performance measures and other quality measurement processes.
- Understanding of Medicare's Merit-based Incentive Payment System (MIPS) program and other pay for performance programs.
- Understanding the different uses of performance measures (for both accountability and quality improvement purposes) and their working relationship with evidence-based guidelines of care, maintenance of certification, and payment.
- Familiarity with measurement principles (specifications [numerator, denominator, measure exceptions, etc. assessing/grading evidence, usability, etc.)

Composition: Max #11

1 Chair

1 Deputy Chair

8 At-large Members

- *One at-large member should be a Dermatopathologist*
- *One at-large member should be a medical Dermatologist*
- *One at-large member should be a Mohs Surgeon*
- *One at-large member should be a pediatric Dermatologist*
- *One at-large member should be in a private practice*

1 Ex-Officio Member:

- Representative from Health IT Committee

2 Residents (*non-voting*) (*not included in count*)

Appointment Term:

Chair – two-year term; Deputy Chair – two-year term; Member – three-year term

Miscellaneous Policies

Bona Fide Dermatologic Society (definition for a sister society)

The following definition was approved by the Board of Directors.

A bona fide dermatologic society must:

- be incorporated as a 501 (c) 3 or 501 (c) 6 not for profit organization with an individual physician membership,
- have a majority of its members who are certified or eligible to be certified by the American Board of Dermatology (ABD), the American Osteopathic Board of Dermatology, the Royal College of Physicians and Surgeons of Canada (Royal College) or a foreign board or its licensing equivalent or who satisfy educational and professional requirements of the ABD or the Royal College;
- provide, as its primary mission, continuing medical education for dermatologists, public education related to dermatologic concerns, professional development programs for dermatologists or support for research in dermatology; and
- derive its revenues principally from member dues and contributions, member service programs, annual meeting fees, or unrestricted educational grants from multiple commercial sources.

Bylaws: Separate Bylaws for Committees & Task Forces

Organizational units within the Academy's governance structure may not have Bylaws separate from those of the Academy. In those instances, where written guidelines are required to delineate the functions and/or operating practices of the committee, task force, etc., they should be identified as "Operational Guidelines" which is the terminology utilized by the Advisory Board.

International League of Dermatologic Societies (ILDS)

Liaison Activity with U.S. and Canadian Member Societies of the International League of Dermatologic Societies (ILDS)

The coordination function between the International Committee of Dermatology and the U.S./Canadian Society representatives will be handled by the officers and coordinated through the Constituent Relations and Strategic Planning department with a specified officer position identified as the responsible individual.

Staff Liaison Responsibilities

1. Serve as a valuable resource to all CCTFs and should be thoroughly familiar with all aspects of the CCTF, including the scope of work and subjects under discussion, and association policies related to the CCTF's work.
2. Prepare all logistical details for meetings and calls and provide administrative support to the chair and CCTF members. Remember, too large a staff role reduces the value of the CCTF and reduces the motivation of our members. Too small a staff role often results in the CCTF's drifting aimlessly and operating ineffectively, so it is the staff liaison's role to figure out the perfect balance.
3. Responsible for preparing an agenda packet for every meeting and/or call. The agenda packet should include:
 - a. Confirmation email with the logistical information for the meeting and/or call
 - b. Agenda which should be prepared working in collaboration with the chair of the CCTF
 - c. Include AAD/A Organizational Structure chart in all agenda packets
 - d. Include an Action Log in all agenda packets
 - e. Background materials for the agenda items
 - f. Disclosure of Outside Interest packet which includes the Executive Summary of the disclosure statements, the Anti-trust Policy Short Statement the CCTF members individual DOI statements and the Guide for Assessing Conflict of Interest Levels
 - g. If there is a guest observer participating in a meeting and/or call, they must sign a Guest Confidentiality Agreement that should be included in the packet.
 - h. Save all their agenda packets, summation reports and email ballots in the Public Share folder/ AAD and AADA Governance History and in the appropriate CCTF folder.
4. Keep relationships with members professional: meet in public places, limit drinking of alcoholic beverages to one or have a soft drink. Also, remember our members are very busy outside the work they do for the Academy, set boundaries and expectations in writing to be respectful of everyone's time.

Staff Liaison Responsibilities

5. Key responsibilities of the staff liaison specific to the chair include -
 - a. Serve as an informed resource to the chair and are to assist in facilitating CCTF discussions and activities which address the CCTFs charge.
 - b. Making early contact and providing insight on orientation that the Academy has available to chairs and deputy chairs.
 - c. Discussing the level of support expected of the staff liaison.
 - d. Maintaining contact regularly
 - e. Helping to prepare and distribute meeting agendas and reports of the CCTF.
 - f. Ensuring that all CCTF work is consistent with the AAD/A's goals and objectives and
 - g. Providing on-site support for CCTF meetings

6. Standard agenda, expanded agenda, summation report and email ballot templates are available to staff liaisons to ensure consistency and continuity across the Academy. (All these templates can be found in the Governance library)
 - a. **Expanded Agenda** template mirrors the agenda indicating where motions and votes are necessary and assists the chair in following parliamentary procedure. The expanded agenda should be used by staff liaisons to take notes during meetings and/or calls.
 - b. There are separate standard and expanded agenda templates for the Annual and Innovation meetings that include additional agenda topics for these in person meetings.
 - c. **Summation Report** template is a summary of the outcomes of the call and/or meeting. Utilizing the expanded agenda to take your notes at the meeting and/or call will help expedite the preparation of the summation report. The summation report should be prepared within a week of the meeting and/or call and should be sent to the chair for review and approval. Upon the chair's approval the staff liaison should send the summation report via email ballot to the members for review and approval.
 - d. **Discussion Report** template is used to document the discussion held at a meeting and/or conference call when a quorum is not present.

Staff Liaison Responsibilities

- e. **Email Ballot** template is used many times for work of a CCTF that can be completed via email versus having a meeting and/or call **if approved by the chair**.
 - f. If you are on a conference call and a discussion between members becomes uncomfortable regarding a vote you can suggest to the chair to move the vote to an email ballot.
 - g. The **Email Ballot Results** template is used to provide the results of the ballot to your members.
7. Additional templates available to staff liaisons are the **Recommendation for Action - RFA** and the **Information Report - IR**. Under the direction of the chair, staff liaisons prepare the RFA or IR that is included in the agenda packet.
- a. RFA is prepared for topics that require the Board to take specific action. All RFAs must be submitted to the CCTFs reporting entity; and if approved by the reporting entity it eventually goes to the Board for approval. A reminder, if there is any financial impact; the RFA must be sent to the Finance Department prior to being sent to the reporting entity.
 - b. IO is used to provide the Board with a summary of information only issues. The IR provides the Board strategic updates that may require future Board action.
8. Staff liaisons are asked to utilize the templates available for these reports to ensure consistency and continuity across the Academy. Providing consistency in our reports and communication promotes teamwork across the Academy.

American Academy of Dermatology/Association (AAD/A) Workgroup Best Practice Document

This document serves to assist AAD/A staff and member leaders on how to request and facilitate workgroups within the AAD/A governance structure. Furthermore, this document aims to ensure consistency in the facilitation of workgroup processes within the AAD/A governance structure.

Workgroups¹ can be defined as groups of multiple individuals who collaborate and work together to produce a specific output, such as solutions, best practices, or recommendations.

When forming a workgroup, the following steps should be considered by the chair of the CCTF forming the workgroup:

- 1) What is the primary mission of the workgroup, including expected deliverables? This should be documented.
- 2) The mission of the workgroup should include a timeline leading to timely completion of the deliverables outlined in the workgroup's mission.
- 3) Members for the workgroup are selected by the chair of the CCTF forming the workgroup. During selection of members, if the chair needs to appoint members not serving on the specific CCTF, the chair should consider members that had applied in the previous appointment cycle and did not receive an appointment to that CCTF. It is important that there is a healthy mix of the membership involved in the governance structure.
- 4) A workgroup must sunset at the completion of its mission.

Once the workgroup is established, staff liaison should provide the following information to the Governance Manager for input into the Academy's database:

- 1) Workgroup Name
- 2) Mission
- 3) Members names and roles
- 4) Projected end date for workgroup

Note:

To create a workgroup for the Clinical Guidelines Committee, refer to the Administrative Regulation on Evidence-Based Clinical Practice Guidelines.

To create a workgroup for the Appropriate Use Criteria Committee, refer to the Administrative Regulation on Appropriate Use Criteria.

¹ If the chair assigns a task to a small group of its council, committee, or task force (CCTF) this would be considered a subcommittee of the CCTF, not a workgroup. As an example, the chair might assign a subcommittee to review and bring back to the full committee its recommendations on a position statement the committee was assigned to review and update.