Present
Bruce H. Thiers, MD, FAAD, President
Susan C. Taylor, MD, FAAD, Vice President
George J. Hruza, MD, MBA, FAAD, Immediate Past President
Marta J. Van Beek, MD, MPH, FAAD, Secretary-Treasurer
Daniel D. Bennett, MD, FAAD, Assistant Secretary-Treasurer
Kenneth J. Tomecki, MD, FAAD, President-elect
Neal D. Bhatia, MD, FAAD, Vice President-elect
Abby S. Van Voorhees, MD, FAAD
Amy McMichael, MD, FAAD
Andrew H. Weinstein, MD, MPH, FAAD
Cheryl M. Burgess, MD, FAAD
Diane S. Berson, MD, FAAD
James Q. Del Rosso, DO, FAAD
Murad Alam, MD, FAAD
Naomi Lawrence, MD, FAAD
Patricia K. Farris, MD, FAAD
Robert S. Kirsner, MD, PhD, FAAD
Robert A. Weiss, MD, FAAD
Seemal R. Desai, MD, FAAD
Valerie D. Callender, MD, FAAD
Adelaide Hebert, MD, FAAD
Alexander Miller, MD, FAAD
Lawrence Green, MD, FAAD
Cyndi Yag-Howard, MD, FAAD

Incoming Board Members
Mark D. Kaufmann, MD, FAAD, President-elect
Linda F. Stein Gold, MD, FAAD, Vice President-elect
April W. Armstrong, MD, MPH, FAAD
Lindy P. Fox, MD, FAAD
Maria K. Hordinsky, MD, FAAD
Jennifer Lucas, MD, FAAD

Staff
Elizabeth K. Usher, MBA, Executive Director and CEO
Robert M. Portman, JD, General Counsel
Barbara Greenan, Senior Vice President, Advocacy
Melanie Tolley Hall, Senior Vice President, Marketing and Communications
Sarah Tancredi, MBA, PHR, Senior Vice President, Operations
Steven Debnar, MBA, Vice President, Finance
Matthew Fitzgerald, DrPH, Vice President, Science & Quality
Krista D. Kauper, Vice President, Strategy, Meetings, Analytics and Alliances
Cindy Kuhn, Vice President, Member Relations and Engagement
Damon Marquis, MA, MS, FACEHP, Vice President, Continuing Professional Education
Erik Horn, Senior Director, Information Technology
Tim Moses, CMP, Senior Director, Meetings and Conventions
Lisa Albany, Director, State Policy
Rachna Chaudhari, Director, Practice Management
CALL TO ORDER
Bruce H. Thiers, MD, FAAD, President and presiding, called the meeting of the Board of Directors of the American Academy of Dermatology and Association to order at 10:47 am (CDT) on Saturday, March 20, 2021.

QUORUM
Marta J. Van Beek, MD, MPH, FAAD, Secretary-Treasurer declared that a quorum was present for the transaction of business.

ORDER OF BUSINESS/INTRODUCTORY MATTERS

Antitrust Compliance Policy, Fiduciary Obligations, and Note Taking
Dr. Van Beek referred the Board members to the background materials regarding the AAD/A Antitrust Compliance Policy, note taking during meetings, and separate order of business, and reminded them about the importance of following their fiduciary obligations, including maintaining confidentiality and declaring conflicts of interest.

Disclosure of Outside Interests and Management of Conflicts of Interest, Code of Conduct, Confidentiality Agreement and Copyright Assignment of Work Product Policies
The Board members’ disclosures of outside interests and code of conduct were posted to BoardEffect. Dr. Van Beek asked Board members to declare any other actual or potential conflicts of interest with respect to specific agenda items for this meeting. None were declared.

Separate Order of Business
Dr. Van Beek reminded the Board members that they would be following the American Institute of Parliamentarians Standard Code of Parliamentary Procedure (formerly Sturgis Code of Parliamentary Procedure), and that it is essential that the AADA follow the order of business and observe corporate formalities necessary to ensure the separateness of the two organizations.

AADA OFFICER AND DIRECTORS REPORTS
Dr. Thiers reminded the Board that his report, the Secretary-Treasurer’s report, the Executive Director’s report, the International, Young Physician’s and Residents/Fellows Board Observer reports were presented during the Academy Board meeting.
AADA STRATEGIC ISSUES

Council on Government Affairs and Health Policy (GAHP)
2021 AADA Advocacy Agenda

Bruce A. Brod, MD, MHCI, FAAD, presented the Council on Government Affairs and Health Policy’s (GAHP) report at pp. 1-20 of the Board materials. Dr. Brod described the process for developing the Advocacy Agenda, including a survey of members in which the members rank the priorities in three tiers within two categories. The priorities are then reviewed and approved by the Council on GAHP and Board of Directors. He then provided some examples of where specific issues fell within the ranking process. Ms. Barbara Greenan and he discussed some issues that moved from one tier to another in this year’s agenda.

A motion was made and duly seconded to approve the 2021 Advocacy Agenda as presented.

ACTION: Approved unanimously

A motion was made and duly seconded to approve the rest of the Council on Government Affairs and Health Policy report for information only.

ACTION: Approved

The Board recessed so that it could take up AAD business at 11:04 am (CDT).

The Board reconvened the AADA Board meeting at 3:09 pm (CDT).

AADA UNFINISHED BUSINESS

Program Assessment Workgroup

Advocacy & Policy: Alternative Payment Models/Actinic Keratosis (APM/AK) Program

Henry W. Lim, MD, FAAD, presented the Program Assessment Workgroup’s report at pp. 21-22 of the Board background materials. Dr. Lim noted that Workgroup presented its final recommendations to the Board of Directors on January 24, 2021. The Board approved strategies for all programs, except the APM/AK program. The main purpose of this report was to review the Workgroup’s recommendation for the classification of this program under the Board of Directors’ strategic plan.

Dr. Lim noted that the Workgroup recommended Orderly Divestment of the APM/AK. More specifically, the Workgroup recommended that the work on this initiative be wrapped up, that the contract with Milliman be concluded, and that staff resources and funds be reallocated to other higher-priority projects. The Workgroup added that it did not believe the Centers for Medicare and Medicaid Services (CMS) would accept an APM/AK since the agency has been de-emphasizing disease specific APM, but that AADA could monitor the activity in this area and re-start the initiative if the policy and political landscape changes.

Howard W. Rogers, MD, FAAD then provided the perspective of the Workgroup on Innovations in Payment and Delivery (WIPD). The WIPD believes that an APM/AK is necessary to provide CMS with an alternative to dramatically reducing the value of premalignant and benign destruction codes (17000, 17004, and 17110) while proving to CMS that dermatology is able to bring savings to the system. He noted that AADA has engaged Milliman to assist in conceptualizing and developing an APM/AK and discussed the next steps in this process. The WIPD is proposing that it be allowed to continue working with Milliman in developing the APM/AK proposal and then advocate with CMS for adoption. He estimated that the proposal could be ready in the next several months.
After extensive discussion, a motion was made and duly seconded to approve the Program Assessment Workgroup’s recommendation for “Orderly Divestment” of the Alternative Payment Models/Actinic Keratoses program.

ACTION: Defeated

A motion was then made and duly seconded to classify the APM/AK program as Build Strength or Sell Out.

ACTION: Approved unanimously

AADA NEW BUSINESS

Council on Practice Management

Teledermatology Position Statement

Valerie D. Callender, MD, FAAD, Bruce A. Brod, MD, MHCI, FAAD and Jules Lipoff, MD, FAAD presented the Council on Practice Management’s report. Dr. Callender asked Jules Lipoff, MD, FAAD and Bruce Brod, MD, FAAD to present the changes to the AADA Position Statement on Teledermatology at pp. 23-30 of the Board’s background materials. They noted that the changes focus on fair reimbursement for teledermatology services, physician licensure issues, the need for coordination of care teams, and clarifications to ensure consistency with other AAD/A position statements.

The Board discussed the changes and suggested some minor edits and deletion of the words “compared to in-person visualization” on p. 25 line 58 and p.27 line 151 of the statement.

A motion was made and duly seconded to approve the revised Teledermatology Position Statement and the series of principles that the Academy should support regarding the practice of telehealth in dermatology as edited by Board.

ACTION: Approved unanimously

SkinPAC Board of Advisors

SkinPAC Scorecard Methodology for 2021 pp. 31-41

George J. Hruza, MD, MBA, FAAD, presented the SkinPAC Board of Advisors report. Dr. Hruza first noted that the SkinPAC had record fundraising success in 2020 election cycle with over $1.65 million raised, making it the fifth largest medical specialty PAC. He also noted that SkinPAC has developed a bipartisan strategy for making contributions to candidates for elected federal office. Specifically, it has developed a non-partisan scorecard methodology based on a number of objective criteria, including but not limited to the individual’s position in Congress and whether they are supportive of issues affecting dermatology.

Dr. Hruza then discussed the efforts that the Board of Advisors made to solicit feedback from AADA members after the January 6 riot on the Capitol. The responses were pretty evenly split on whether SkinPAC should cease making contributions to candidates who voted against certification of the electoral college vote. Based on this feedback, the Board of Advisors recommended that it be permitted to keep the contributions scorecard, but adopt new criteria requiring a pause in contributions to candidates who are under criminal felony indictment and to exclude those candidates who have been convicted of a felony from future contributions. Thus, if any member of Congress were to become criminally implicated in the January 6 riot, that individual would not be eligible for support.

After discussion, a motion was made and duly seconded to approve the recommendations of the
SkinPAC Board of Advisors to:

- Maintain the existing SkinPAC Scorecard Methodology for 2021.
- Formalize what had previously been an informal practice and approve new criteria to pause contributions to candidates under criminal felony indictment and refer to the SkinPAC Board of Advisors for further consideration, if necessary, with additional criteria that candidates convicted will no longer be eligible for SkinPAC contributions.
- Reaffirm the non-partisan nature of SkinPAC, reinforce SkinPAC’s bipartisan approach to contributions, and continue to communicate these messages regarding SkinPAC to AADA members as needed.

The Board discussed whether the Board of Advisors should add a criterion that assigns negative points for candidates who demonstrate that they do not believe in science or medicine.

**ACTION:** Approved with one opposed and one abstention

**Organizational Structure Committee**

*Patient Access and Payer Relations Committee*

Dr. Van Beek stated the Patient Access and Payer Relations Committee’s mission statement was reviewed and updated to better reflect the work it does. She referred the Board to page 35 of the AAD Board materials for the specific edits.

A motion was made and duly seconded to approve the proposed revisions to the mission statement for the Patient Access and Payer Relations Committee.

**ACTION:** Approved

**AADA Annual Organizational Resolution**

Dr. Van Beek stated that this resolution is a housekeeping matter that allows the officers and staff to transact business on behalf of the Association.

A motion was made and duly seconded to adopt the AADA Annual Organizational Resolution as presented.

**ACTION:** Approved

**Ad Hoc Task Force on COVID-19**

Dr. Hruza reported on the activities of the COVID-19 Task Force, including its advocacy efforts, the development of a COVID-19 resource center, and the formation of a COVID-19 dermatology registry.

A motion was made and duly seconded to approve the AHTF on COVID-19 report for information only.

**ACTION:** Approved

A motion was made and duly seconded that the Association takes the same actions as were taken by the Academy Board of Directors for all of the other applicable reports.

**ACTION:** Approved
ADJOURNMENT
There being no further business, Dr. Thiers adjourned the AADA Board of Directors Meeting at 5:20 pm (CDT).

Respectfully Submitted,

Marta J. Van Beek, MD, MPH, FAAD
Secretary-Treasurer