

PRIVILEGED AND CONFIDENTIAL DRAFT
ATTORNEY-CLIENT COMMUNICATION
AMERICAN ACADEMY OF DERMATOLOGY
MAY 3, 2025

Present

Susan C. Taylor, MD, President
Kevin D. Cooper, MD, FAAD, Vice President
Seemal R. Desai, MD, FAAD, Immediate Past President
Keyvan Nouri, MD, MBA, FAAD, Secretary-Treasurer
Sabra Sullivan, MD, PhD, FAAD, Assistant Secretary-Treasurer
Murad Alam, MD, FAAD, President-elect
Lawrence J. Green, MD, FAAD, Vice President-elect
Tammie C. Ferringer, MD, FAAD
Brad P. Glick, DO, MPH, FAAD
Adrian O. Rodriguez, MD, FAAD
Bruce A. Brod, MD, MCH, FAAD
Brent R. Moody, MD, FAAD
Todd Schlesinger, MD, FAAD
Allison T. Vidimos, MD, RPh, FAAD
M. Laurin Council, MD, MBA, FAAD
Carrie L. Davis, MD, FAAD
Amy J. Derick, MD, FAAD
Alexander S. Gross, MD, FAAD
Howard W. Rogers, MD, PhD, FAAD
Andrew F. Alexis, MD, MPH, FAAD
A. Shadi Kourosh, MD, MPH, FAAD
Seth L. Matarasso, MD, FAAD
Joseph Merola, MD, MSc, FAAD
Bridget McIlwee, DO, FAAD, Young Physicians Board Advisor
Fatima Mirza, MD, MPH, Residents/Fellows Board Advisor
Elizabeth K. Usher, MBA, Executive Director and CEO
Melanie Hall, Senior Vice President, Marketing and Communications
Krista D. Kauper, JD, Senior Vice President, Strategy & Membership
Karry La Violette, Senior Vice President, Advocacy & Policy
Rudy Anderson, CAE, Vice President, Development and Revenue
Steven Debnar, MBA, Vice President, Finance
Sukhjeet S. Ahuja, MD, MPH, Vice President, Science and Quality
Cindy Kuhn, MSc, Vice President, Membership & Community Impact
Amy Outschoorn, EdD, Vice President, Education & Practice Management
Erik Horn, MBA, Senior Director, Technology & Security
Katie Domanowski, Senior Director, Communications
Cyndi Del Boccio, Director, Governance
Michelle Pizarro, MHA, Director, Executive Projects & Operations
Jason Z. Qu, JD, General Counsel

Not Present

Ruth Ann Vleugels, MD, MPH, FAAD
Sarah Tancredi, MBA, PHR, Senior Vice President, Operations
Timothy A. Moses, CMP, Senior Director, Meetings & Conventions,
Baruch H. Kaplan, MD, IFAAD, International Board Observer

Guests

Rebecca Vasquez, MD, FAAD, Chair, Diversity Committee

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CALL TO ORDER

Susan C. Taylor, MD, FAAD, President and presiding, called the meeting of the Board of Directors of the American Academy of Dermatology (AAD) to order at 8:00 a.m. (Eastern) on Saturday, May 5, 2025 and welcomed the guests who would be present later in the day, Drs. Rebecca Vasquez, Chair, Diversity Committee and Andrew Weinstein, Chair, Ad Hoc Task Force on Finding Common Sense Medicare Legislation.

QUORUM

Keyvan Nouri, MD, MBA, FAAD, Secretary-Treasurer, declared that a quorum was present for the transaction of business.

ORDER OF BUSINESS/INTRODUCTORY MATTERS

Board Obligations and Duties

Dr. Taylor reminded the Board members of their fiduciary duty to review and vote on online ballot items prior to the Board meeting and to respond to emails, polls, ballots, and other items in between Board meetings. She discussed some logistics and norms for the meeting and reminded Board members to keep discussions strategic and in line with parliamentary procedure.

Dr. Nouri discussed the fiduciary duties of Board members including the duty of care, duty of loyalty, and duty of obedience. He also discussed the importance of antitrust compliance, protection of the organization's assets, including its intellectual property, and confidentiality, including limits on notetaking and the use of AI notetaking or meeting recording tools.

Dr. Nouri then discussed the importance of conflict-of-interest disclosures and noted that the Board members' disclosure of outside interest forms had been posted to BoardEffect. He stated that the Executive Committee had compared the Board's executive summary of disclosures to the agenda topics for the meeting in an effort to preemptively identify potential conflicts or dualities of interest. Dr. Nouri emphasized that this review does not override each Board members' affirmative responsibility to identify and disclose potential conflicts of interest as they arise during the course of the Board's discussions. He noted that the existence of outside interests is common, can be managed effectively through disclosure, and should not be seen in a negative light. Dr. Nouri also reminded Board members to update their disclosure forms on a regular basis. He then asked if the Board members had any additional conflicts to disclose. None were declared.

Dr. Nouri also discussed the importance of maintaining confidentiality and of engaging in candid, engaged conversations during the meeting.

Parliamentary Procedures and Separate Order of Business

Jason Z. Qu, JD, General Counsel, 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 Board follow the order of business for the meeting, and to observe other corporate formalities, to ensure that AAD business is conducted separately from AADA business.

AAD OFFICER AND DIRECTOR REPORTS

President's Report

Dr. Taylor discussed leadership principles and organizational insights from *The Leadership Moment*, a book highlighting leadership case studies which was provided to the Board. Dr. Taylor then reviewed the Academy Board Values of Professionalism, Unity, Engaged and Curious Mindset, Strategic Focus and Discipline, and Visionary Leadership that had recently been developed and adopted by the Board.

Dr. Taylor reported on activities, meetings, and other developments since the March Board meeting,

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including:

- Continuing advocacy before Congress on Medicare payment reform—including the development of bipartisan relief solutions for Medicare cuts and opposition to an add-on code which has negatively impacted the conversion factor—and on related issues including prior authorization and step therapy protocol relief.
- Recent advocacy successes on payment policy issues including changes to formulary and access restrictions favorable to dermatology, maintenance of the Centers for Medicare & Medicaid Services (CMS) performance threshold, and inclusion of priority provisions in the CMS prior authorization rule.
- Advocacy before federal policymakers and regulators on issues including drug shortages, Food and Drug Administration (FDA) approval and access issues surrounding sunscreen and allergen products, repeal of the tanning tax, and revision of new Clinical Laboratory Improvement Amendments (CLIA) rules limiting the ability of dermatologists to serve as laboratory directors.
- Advocacy before state policymakers and regulators on issues including sunscreen access, step therapy reform, and health care provider transparency.
- Initiatives in line with AAD's international strategy including establishment of an academic exchange platform between AAD and dermatologists in China and AAD representation at the Brazilian Congress of Dermatological Surgery.
- AAD representation at key dermatological meetings in the United States including the Industry Summit and numerous state society meetings.

Gold Medal Recipient - Confidential

Dr. Taylor referred the Board to pp. 11 – 14 and presented her proposed Gold Medal recipient. She stated that the 2026 Gold Medal award recipient would be Henry W. Lim, MD, FAAD. She referred to the Board's background materials for information on Dr. Lim's impressive background and record of service to the dermatological community.

A motion was made and duly seconded to award the Gold Medal to Henry W. Lim, MD, FAAD, for information only.

ACTION: APPROVED

Honorary Members Administrative Regulation

Dr. Taylor then presented proposed edits to the Administrative Regulation for Honorary Membership to replace the universal, fixed requirement that eligible recipients be age 65 or older with more flexible guidelines regarding the age of eligible recipients, as follows:

Criteria: There should be no fixed age, as cultural and societal definitions of "senior" can range from 55 to 65 years or older. Typically, individuals who have experienced a meritorious career will fall within the senior age group. However, exceptions may arise, so it is best to avoid specifying an exact age. In most instances, those chosen would generally be 65 years or older. ~~Age 65 and older; or currently a Life member, or not otherwise eligible for AAD membership.~~

A motion was made and duly seconded to approve the proposed edits to the Administrative Regulation for Honorary Membership as presented.

ACTION: APPROVED

A motion was made and duly seconded to approve the rest of the President's report for information only.

ACTION: APPROVED

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Secretary-Treasurer's Report

First Quarter Financial Report Ending March 31, 2025

Dr. Nouri referred the Board to pp. 15 – 19 of the background materials and presented the First Quarter Financial Report Ending March 31, 2025. He expressed gratitude for the contributions of Academy staff and noted that the report only covered information through Q1. Dr. Nouri's report noted that:

- Membership retention was slightly stronger in Q1 2025 compared to the same period in 2024 (94.5% vs. 94.4%), although retention of fellows under 40 would be an area of continuing focus.
- 2025 Annual Meeting revenue was impressive, including record-breaking registration and notable continuing growth in President's Gala revenue, resulting in total revenue \$3.13M above budget.
- Q1 financial performance was strong overall, with revenue currently \$2.07M over budget and all expense categories at or below budget, resulting in a projected net surplus ~\$3.57M over budget at the end of Q1. Dr. Nouri noted that this net surplus is expected to decrease as a disproportionate number of expenses are incurred later in the year.
- Investment returns were generally at or exceeding benchmarks despite Q1 market volatility.

A motion was made and duly seconded to approve the First Quarter Year-to-Date Financial Report Ending March 31, 2025, for information only.

ACTION: APPROVED

Board members discussed the financial challenges facing young dermatologists, the importance of ensuring that Academy membership remains accessible and of high value for younger members, and potential strategies for offering more discounts and/or access to affordable hotel blocks for Annual Meeting attendees who are young members.

2026 Cost of Living Incremental Adjustment

Dr. Nouri referred the Board to p. 20 of the background materials and presented the 2026 Cost of Living Incremental Adjustment recommendation. He stated that in 2015 the membership approved a one-time \$50 dues increase along with an annual cost of living (COL) increase based on the Consumer Price Index-Urban (CPI-U). Changes to the dues impact Fellow, Associate, Adjunct and Affiliate memberships.

He noted according to AAD policy, the Board is authorized to increase dues by the CPI each year but also has the discretion to keep dues the same or increase or adopt a smaller increase. He stated that the AAD/A dues are within the range of dues charged by other specialty societies and other dermatology societies. Dr. Nouri stated the 2024 CPI-U index increase is 2.9% and that the recommendation is to increase the 2025 dues rates for the Fellow, Associate, Adjunct and Affiliate memberships by \$15 or 1.5% for the 2026 Dues cycle.

A motion was made and duly seconded to approve a Cost of Living Incremental Adjustment for Fellow, Associate, Affiliate and Corporate/Vet/Others Adjuncts to \$995, Research Adjuncts to \$625, Military to \$595, and International Fellows and Associates to \$495 for 2026.

ACTION: APPROVED

The Board discussed the importance of proactively engaging members around the fact that dues will likely pass the \$1000 threshold in 2027.

Executive Director's Report

Key Performance Indicators (KPI) Targets for 2025

Elizabeth K. Usher, MBA, Executive Director and CEO, referred the Board to her written report on pp. 21 – 29 and reported on the several issues and activities, including:

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- Recapping Annual Meeting success and finalized metrics showing record-breaking attendance and strong revenue performance.
- Advancements in education and data initiatives including enhancements to the Innovation Academy program, new digital learning activities, and successful launch of the new DataDerm platform.
- Q1 results on Board-approved annual KPIs to the extent preliminary information is available, showing financial KPIs on track and member retention currently 0.2% short of the 2025 target of 97.6%.

A proposed motion was made and duly seconded to approve the Executive Director's report for information only.

ACTION: APPROVED

In response to questions from the Board regarding the 2025 Innovation Academy meeting, Krista D. Kauper, JD, Senior Vice President, Strategy & Membership, reported that meeting indicators including registration, revenue performance, and program finalization were currently strong. She noted that targeted marketing campaigns were ongoing and encouraged Directors to help publicize the meeting.

AAD STRATEGIC ISSUES

Dr. Taylor introduced a new approach for the Board's discussion of strategic issues to ensure active cross-Board engagement. She asked each Board member to generate three questions or discussion items while listening to each strategic presentation, in real time, to ensure that priority items were captured and addressed during the Board's post-presentation deliberations.

AAD Risk Assessment Initiative

Dr. Nouri referred the Board to pp. 47 – 75 of the background materials and presented the AAD Risk Assessment report. He reminded the Board that the Academy had initiated an enterprise risk assessment initiative in 2024 to systematically identify, analyze, and address enterprise risk as an element of the Academy's strategic commitment to risk assessment and mitigation. Dr. Nouri stated that the risk assessment methodology divided risks between four thematic categories—strategic & programmatic, funding-related, operational, and risks to the specialty that may impact the Academy—and that the results of the initiative would provide strategic direction for the budget planning process.

Ms. Kauper noted that the risk assessment initiative involved a three-phase process of information-gathering, development of proposed mitigation strategies, and the creation of a final assessment and recommendations report. Ms. Kauper also noted that the report methodology categorized each risk according to (1) likelihood of occurrence and (2) impact of occurrence to help determine a priority risk management approach for each risk.

Ms. Kauper then presented a summary of the enterprise risk report which had been provided to the Board as part of the meeting materials. Ms. Kauper described how two risk management approaches—either reducing the likelihood of occurrence or the impact of occurrence—had ultimately been assigned to each risk within each of the four thematic risk categories. Ms. Kauper then presented three sample risk assessment reports to demonstrate how the methodology helped to (1) identify specific risks, (2) prioritize risks according to likelihood and impact, (3) document specific potential impacts of each risk, (4) hone risk mitigation strategies around a particular risk management approach, and (5) identify both current risk mitigation strategies and strategies that could be developed or enhanced in the future.

Ms. Kauper discussed how the risk assessment report would be used to assess investments into new and/or expanded mitigation strategies through the annual budget process and noted that the report would be continually reviewed and updated to support this functionality.

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A proposed motion was made and duly seconded to approve the AAD Risk Assessment Report as presented.

ACTION: APPROVED

The Board discussed how the report methodology could apply to emerging or evolving risks including young member engagement, technology and telemedicine, international opportunities, and the Innovation Academy meeting. The discussion emphasized the importance of operationalizing the Risk Report through integration with the budget process and touched on how coordination would be required with respect to mitigation strategies that extend across multiple budget categories.

Council on Member Services

Advancing Inclusivity in Dermatology Strategy & Plan

Andrew F. Alexis, MD, MPH, FAAD referred the Board to pp. 30 – 46 of the background materials and presented the Council on Member Services report. Dr. Alexis stated that the plan fits within the Academy's mission, values, and strategic priorities, including with respect to advocacy, education, access to care, and data-driven transformation of care.

Rebecca Vasquez, MD, FAAD, Chair, Diversity Committee, stated that the plan builds on past accomplishments, incorporates input from member consultations, and foregrounds the strategic importance of addressing health inequities. Dr. Vasquez discussed additional key considerations that informed the development of the plan including the long-term necessity of building a culture of inclusivity within the Academy and the impact of inclusivity on the quality of education and patient care. Finally, Dr. Vasquez presented the following three strategic goals under the 5-year plan: (1) physician & patient education; (2) culture of inclusivity & belonging; and (3) workforce representation.

A motion was made and duly seconded to approve the five-year strategic goals and initiatives to advance inclusivity in dermatology as presented.

Members of the Board expressed approval regarding the plan's emphasis on inclusivity and its connection to strategic and mission-related priorities including patient care, public engagement, and research quality. Board members discussed how the plan could accommodate member traits such as disability and practice-specific traits including practice type and subspecialty. Some Board members expressed concerns relating to certain proposals, themes, and goals within the plan in light of current legal and political sensitivities around Diversity, Equity and Inclusion.

A subsidiary motion was made and duly seconded to refer the plan back to the Council on Member Services for further consideration and development, including an opportunity to collect input from all members of the Board.

ACTION on SUBSIDIARY MOTION: APPROVED

Executive Committee

Revenue Strategy & Diversification Update

Ms. Usher referred the Board to p. 76 of the background materials and described how the Academy's 2023-2025 revenue strategy focused on revenue growth and diversification. She noted that the Academy's revenue operation was based on a strong foundation and that diversification efforts under the current plan have been successful—including when benchmarked against comparable organizations—and that growth in revenue has been supported by the implementation of a new project management framework. Ms. Usher stated that the Academy's revenue strategy has always evolved in line with its mission, activities, services, and programs and that decisions around revenue growth and diversification are typically made against the backdrop of strategic programmatic considerations.

Ms. Usher then described how the Academy's updated revenue strategy was informed by benchmarking and comparative analysis to capture cross-sector trends. She stated that insights from the comparative review included an increasing reliance on program service revenue and a decline in non-traditional revenue generation strategies such as royalties and leasing. Ms. Usher highlighted some potential categories for new or expanded revenue generation opportunities but noted that the Board's strategic input was being sought with respect to two higher-level revenue objectives by 2030: a revenue growth target set at between \$95.8M to \$111.0M and a year-over-year growth rate target set at between 4.8% and 8.3%. Ms. Usher stated that these targets would facilitate multi-year revenue planning across the Academy and across specific revenue categories. She also noted that these targets would help to develop and prioritize the Academy's investments into three distinct revenue growth approaches: (1) "optimizing" existing product lines, (2) "expanding" the revenue pie within existing lines, and/or (3) "diversifying" revenue lines to create new and/or different revenue streams.

Melanie Hall, Senior Vice President, Marketing and Communications, provided more details about the three growth approaches and shared how staff had mapped the approaches onto each major existing product line. Rudy Anderson, CAE, Vice President, Development and Revenue, summarized the financial, human, technology, and operational resourcing considerations relevant to pursuing each growth approach, including the significant risks and considerations that arise when pursuing opportunities to diversify revenue. Mr. Anderson stated that next steps would be to further define specific initiatives under one or more growth approaches across the revenue categories and to advance those initiatives through the established budget and project management process, all while seeking continual feedback from members and member leaders. He shared that preliminary initiatives would include assessment of the Academy's pricing strategy and a licensing model for DataDerm.

A proposed motion was made and duly seconded to approve the Revenue Strategy Update report, including the revenue growth objectives and growth approach framework, as presented.

ACTION: APPROVED

Members of the Board expressed approval around the report framework and discussed its relevance to specific revenue growth opportunities including with respect to licensing, certifications, and credentialing and with respect to international activities. Members of the Board emphasized the importance of engaging members and other stakeholders around significant new proposals and/or initiatives which may benefit from the insight and expertise of membership.

AAD HEARD FROM THE FIELD

Dr. Taylor invited Board members to raise issues of concern they were hearing out in the field that fall under the purview of the AAD Board. The following issues were discussed:

- The impact of federal budget cuts on availability of resident education, training, and research opportunities;
- A suggestion to hold more surgical sessions on higher-volume days of the Annual Meeting rather than at the beginning and end of the core meeting schedule;
- Reinstatement that the Ad Hoc Task Force on Clinical Guidelines is to revamp the guidelines process, including potential creation of a more streamlined process for different types of guidance documents.

AAD UNFINISHED BUSINESS

Professionalism and Ethics Committee

Administrative Regulation on Code of Medical Ethics for Dermatologists

Adrian O. Rodriguez, MD, FAAD, referred the Board to pp. 77 – 117 of the background materials and presented the Professionalism and Ethics Committee report. He stated that the Professionalism and

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Ethics Committee had approved edits to the Academy's Code of Professional Ethics ("Ethics Code") and Disciplinary Procedures to advance the Board's strategic goal of narrowing the breadth and scope of matters that could qualify for review under the Academy's internal disciplinary procedures.

Dr. Rodriguez stated that the edits to the Ethics Code were meant to distinguish between aspirational ethical principles and enforceable ethical standards within the Code's existing provisions, which should have the effect of significantly narrowing the range of potential violations that could become subject to the Academy's internal disciplinary process.

A proposed motion was made and duly seconded to approve the proposed edits to the Administrative Regulation on Code of Medical Ethics for Dermatologists as presented, with the following additional edit adding a phrase to Section IV, Principle A:

The dermatologist continually should strive to maintain, apply, and advance medical and scientific knowledge and skill; and should make available to patients, colleagues, and the public the benefits of his or her professional attainments. Each dermatologist should participate in [professional development activities including](#) continuing medical educational activities.

ACTION: APPROVED

Administrative Regulation on Disciplinary Procedures

Dr. Rodriguez stated the Committee's proposed changes to the Disciplinary Procedures were also designed to ensure that the Academy's disciplinary process was used exclusively for serious matters that implicated core Academy interests.

A proposed motion was made and duly seconded to approve the proposed edits to the Administrative Regulation on Disciplinary Procedures as presented.

ACTION: APPROVED

Board Governance Policy: Conduct at AAD/A Meetings and other AAD/A Activities

Dr. Rodriguez stated the Committee had made proposed edits to the Academy's meeting conduct policy with the goal of clarifying that online conduct and communications may constitute a violation of the Policy in narrow circumstances, but that the Policy did not extend to harassing or other covered behavior that lacked any nexus with AAD/A meetings or events.

A proposed motion was made and duly seconded to approve the proposed edits to the Board Governance Policy: Conduct at AAD/A Meetings and other AAD/A Activities as presented.

ACTION: APPROVED

Position Statement on Medical Professionalism in the Use of Social Media

Dr. Rodriguez stated that this Position Statement was restructured, streamlined, and updated but that the Committee did not choose to adopt any significant substantive edits or to create new enforceable rules regarding social media use.

A proposed motion was made and duly seconded to approve the proposed edits to the Position Statement on Medical Professionalism in the Use of Social Media as presented.

ACTION: APPROVED

Council on Science and Research

Position Statement on Climate Change and Health

Tammie C. Ferringer, MD, FAAD, referred the Board to pp. 118 – 122 of the background materials and stated that the Council's goal in revising the Position Statement of Climate Change and Health was to address the scientific reality of climate change and its impact on dermatological health in a focused, accessible, and mission-centered manner.

A proposed motion was made and duly seconded to approve the new position statement on Climate Change and Health as presented.

ACTION: APPROVED

AAD NEW BUSINESS

AAD Advisory Board

AAD 001 – Reaffirming the American Academy of Dermatology's (AAD) Commitment to the Early Diagnosis and Treatment of Melanoma

Amy J. Derick, MD, FAAD referred the Board to pp. 123 – 135 of the background materials and presented the following Advisory Board resolution:

BE IT FURTHER RESOLVED, that the AAD works to correct any public narrative suggesting that melanoma is being over diagnosed, as such claims risk fostering confusion, complacency, and adverse outcomes for patients; and

BE IT FURTHER RESOLVED, that the AAD shall proactively promote the importance of early melanoma detection and accurate histopathologic diagnosis through robust public education campaigns, scientific publications, and member resources—emphasizing the life-saving benefits of vigilance and prompt intervention; and

BE IT FURTHER RESOLVED, that AAD encourages continued research and educational initiatives in melanoma diagnosis and treatment to ensure that dermatologists remain at the forefront of delivering high-quality, evidence-based care; and

BE IT FURTHER RESOLVED, that the AAD Board of Directors engage actively with other professional organizations and stakeholders to counter misinformation and to advance a unified, science-driven approach to melanoma management.

Members of the Board discussed (1) how the charge to “correct any public narrative” around melanoma overdiagnosis in the first resolved statement created an overly broad affirmative obligation on the part of the Academy and (2) whether it was appropriate, in the final resolved statement, to charge the AAD Board specifically with engaging other professional organizations and stakeholders around melanoma misinformation.

A motion was duly made seconded to refer resolution AAD 001 to the Clinical Guidelines Committee for further consideration and revision to address the Board's concerns around the first and final resolved statements.

ACTION: APPROVED; 1 Abstained

Dr. Derick abstained from voting on this and all other motions relating AAD Advisory Board business items.

AAD 002 – Reducing the Restriction Period for Social Media Correspondents Running for the Board of Directors American Academy of Dermatology I Association

Dr. Derick presented the following Advisory Board resolution:

THEREFORE BE IT RESOLVED, that the AAD Board of Directors shall amend the restriction period for former Social Media Correspondents running for the BOD from two years to one year following the completion of their contract; and

THEREFORE, BE IT RESOLVED, that the AAD ensure the Social Media Correspondent contract terminates with sufficient time so that the effective one year wash out period not extend beyond one election cycle; and

BE IT FURTHER RESOLVED, that the AAD shall ensure that all leadership eligibility restrictions are periodically reviewed for consistency and fairness, ensuring that no position is unfairly given advantage or disadvantage in the pathway to leadership roles within the organization.

A motion was made and duly seconded to adopt resolution AAD 002 as presented. Members of the Board noted that the Board had already considered the underlying substantive rationale for retaining the two-year restriction period.

ACTION: DEFEATED; 2 Abstained

A motion was made and duly seconded to instruct the Council on Communications to ensure that Social Media Correspondent contracts terminate with sufficient time so that the two-year restriction period does not effectively extend beyond two election cycles.

ACTION: APPROVED; 1 Abstained

AAD/A 006 – Establishing a Leadership Development Track for Non-Academic Leaders in Dermatology
Dr. Derick presented the following resolution:

THEREFORE, BE IT RESOLVED, that the AAD/A create a year-long Leadership Development Program specifically designed for non-academic leaders within the organization; and

BE IT FURTHER RESOLVED, that this program provide structured mentoring, leadership training, and networking opportunities tailored to the unique challenges and opportunities faced by non-academic dermatologists; and

BE IT FURTHER RESOLVED, that the AAD/A allocate the necessary resources to develop and implement this program, ensuring accessibility to a diverse cohort of participants.

A motion was made and duly seconded to refer resolution AAD/A 006 to the Leadership Development Steering Committee noting the Board's overall support for the concept of a non-academic leadership development track and for the Steering Committee's continued engagement with this proposal.

Ms. Kauper clarified that this proposal had also been made directly to the Leadership Development Steering Committee and that the Committee was already interested in exploring this opportunity.

ACTION: APPROVED; 1 Abstained

AAD/A 007 – Creation of a Pediatric Dermatology Committee
Dr. Derick presented the following resolved:

BE IT FURTHER RESOLVED, that the American Academy of Dermatology | Association (AAD/A) establish a Pediatric Dermatology Committee to exist within the Council, Committees and Task Forces and all the rights and functions of the Councils, Committees and Task Forces.

A motion was made and duly seconded to adopt resolution AAD/A 007 as presented.

ACTION: APPROVED; 1 Abstained

The Board recessed the AAD Board meeting and convened AAD Association Board Meeting at 3:01pm (Eastern).

The Board recessed the AAD Association Board meeting at 3:53 pm and reconvened the AAD Board Meeting at 3:54pm.

AAD Advisory Board

AAD/A 008 – Directive for the American Academy of Dermatology/Association (AAD/A) Board of Directors to Assess and Optimize Staffing Requirements and Structure to Enhance Efficiency and Member Services

Dr. Derick presented the following Advisory Board resolution:

BE IT FURTHER RESOLVED, that the AAD/A Board of Directors shall implement a strategic assessment of staffing needs to identify areas where efficiencies can be gained through the reduction of duplication and a more focused alignment of resources with priority initiatives; and

BE IT FURTHER RESOLVED, that this restructuring shall emphasize practice operational support and reimbursement advocacy as primary objectives, ensuring that staffing and resources remain directed toward these critical areas until such time as these goals have been successfully attained; and

BE IT FURTHER RESOLVED, that the Board of Directors shall prioritize the integration of AI and other technological advancements to optimize operations while ensuring that essential functions and service quality are maintained or enhanced; and

BE IT FURTHER RESOLVED, that the Board of Directors shall conduct a comprehensive role assessment to identify areas of inefficiency and opportunity, ensuring that any workforce adjustments are strategic and aligned with the most pressing immediate demands on the organization; and

BE IT FURTHER RESOLVED, that the Board of Directors shall provide regular updates to AAD/A members on progress, cost efficiencies achieved, and reinvestment strategies that directly benefit members, including strengthened advocacy efforts, expanded practice support programs, and technology enhancements to improve member services. This approach ensures that AAD/A remains financially responsible while prioritizing its core mission, advocacy efforts, and member services in a sustainable and strategic manner.

Dr. Derick noted that supporters of this proposal sought to ensure that the Academy was actively identifying potential efficiencies around costs and expenses. Ms. Usher described how the Academy has created robust mechanisms and processes for assessing resource efficiency, staffing needs, and AI implementation. The Board discussed how increased transparency and communication with members could help to assure members that resources are being used responsibly and efficiently.

A motion was made and duly seconded to adopt resolution AAD/A 008 as presented.

ACTION: DEFEATED; 1 Abstained

DataDerm Oversight Committee

DataDerm Transition Update

Bruce A. Brod, MD, MCHI, FAAD, referred the Board to p. 136 of the background materials and provided an update on the DataDerm platform transition process. Dr. Brod stated that the new in-house platform launched successfully on April 15 and that practice transition was going smoothly. He stated that next steps would include advancing user registration and on-boarding through a multi-channel enrollment campaign and further integration with ModMed systems. Dr. Brod stated that uncertainty around Merit-based Incentive Payment System (MIPS) may impact a core existing function of DataDerm and that this underscores the importance of developing broader functionality with respect to research, advocacy, practice management, and quality improvement.

A motion was made and duly seconded to approve the DataDerm Oversight Committee report as presented for information only.

ACTION: APPROVED

The Board recessed the AAD Board meeting at 4:17pm and convened AAD Association Board Meeting at 4:17pm (Eastern).

The Board adjourned the AAD Association Board meeting at 5:09pm and convened the AAD Board Meeting in Executive Session at 5:21pm.

The Board adjourned the AAD Executive Session meeting at 5:41pm and reconvened the AAD Board Meeting at 5:42pm.

SELF-REFLECTION OF BOARD VALUES

Dr. Taylor discussed the facilitated leadership training that would be occurring the next day for members of the Board and the Advisors. She then led the Board through a self-reflection exercise centered around the Academy's board values.

ADJOURNMENT

There being no further business, Dr. Taylor adjourned the Academy Board of Directors Meeting at 5:57 p.m. (Eastern).

Respectfully Submitted,

Keyvan Nouri, MD, MBA, FAAD
Secretary-Treasurer