#### PRIVILEGED AND CONFIDENTIAL DRAFT

# ATTORNEY-CLIENT COMMUNICATION AMERICAN ACADEMY OF DERMATOLOGY ASSOCIATION BOARD OF DIRECTORS MEETING NOVEMBER 6, 2021

# **Present**

Kenneth J. Tomecki, MD, FAAD, President

Neal D. Bhatia, MD, FAAD, Vice President

Bruce H. Thiers. MD. FAAD. Immediate Past President

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

Daniel D. Bennett, MD, FAAD, Assistant Secretary-Treasurer

Mark D. Kaufmann, MD, FAAD, President-elect

Linda F. Stein Gold, MD, FAAD, Vice President-elect

Diane S. Berson, MD, FAAD

James Q. Del Rosso, DO, FAAD

Seemal R. Desai, MD, FAAD

Abby S. Van Voorhees, MD, FAAD

Lawrence Green, MD, FAAD

Adelaide Hebert, MD, FAAD

Alexander Miller, MD, FAAD

Cyndi Yag-Howard, MD, FAAD

Murad Alam, MD, FAAD

Cheryl M. Burgess, MD, FAAD

Naomi Lawrence, MD, FAAD

Amy McMichael, MD, FAAD

Andrew H. Weinstein, MD, MPH, FAAD

April W. Armstrong, MD, MPH, FAAD

Lindy P. Fox, MD, FAAD

Maria K. Hordinsky, MD, FAAD

Jennifer Lucas, MD, FAAD

#### **Incoming Board Members**

Terrence A. Cronin, MD, FAAD, President-elect

Robert S. Kirsner, MD, PhD, FAAD, Vice President-elect

Keyvan Nouri, MD, MBA, FAAD, Incoming Assistant Secretary-Treasurer

Tammie C. Ferringer, MD, FAAD

Brad P. Glick, DO, MPH, FAAD

Adrian O. Rodriguez, MD, FAAD

#### **Not Present**

Ruth Ann Vleugels, MD, MPH, FAAD

#### <u>Guests</u>

Lidia Rudnicka, MD, PhD, International Board Observer

Allison K. Arthur, MD, FAAD, Young Physician Board Observer

Frances M. Walocko, MD, Residents-Fellows Board Observer

Bruce A. Brod, MD, FAAD, Chair, Council on Government Affairs and Health Policy

Howard W. Rogers, MD, FAAD, Member, Innovations in Payment and Delivery Workgroup

#### 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

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Rudy Anderson, CAE, Vice President, Development and Revenue Steven Debnar, MBA, Vice President, Finance Matthew Fitzgerald, DrPH, Vice President, Science and Quality Krista D. Kauper, Vice President, Strategy, Meetings, Analytics and Alliances Cindy Kuhn, Vice President, Member Relations and Engagement Erik Horn, Senior Director, Information Technology Tim Moses, CMP, Senior Director, Meetings and Conventions Cyndi Del Boccio, Director, Governance Michelle Pizarro, Director, Executive Projects & Operations

#### **CALL TO ORDER**

Kenneth J. Tomecki, MD, FAAD, President and presiding, called the meeting of the Board of Directors of the American Academy of Dermatology and Association (AADA) to order at 3:30 p.m. (Central) on Saturday, November 6, 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**

Robert M. Portman, 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 and observe corporate formalities necessary to ensure the separateness of the two organizations.

#### AADA OFFICER AND DIRECTOR REPORTS

Dr. Tomecki reminded the Board that his report, the Secretary-Treasurer's report, the Executive Director's report, the Young Physician's and Residents/Fellows reports were presented during the Academy Board meeting.

#### AADA HEARD FROM THE FIELD

Dr. Tomecki invited Board members to raise issues of concern that they were hearing out in the field which fall under the purview of the AADA Board. Board members raised issues regarding Medicare reimbursement and scope of practice issues in Florida.

# AADA STRATEGIC ISSUE

**Steering Committee** *Health Policy Retreat Report* 

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Bruce A. Brod, MD, MHCI, FAAD, referred the Board to p. 2 of the Board background materials and presented the Steering Committee's recommendation. He first noted that Paul Meyer of Tecker International, who was the AADA's principal consultant for this project, passed away from complications of a stroke in September 2021 and expressed AAD/A's heartfelt condolences to Mr. Meyer's family. Dr. Brod then provided background on the purpose of Health Policy Retreat and previous recommendations that arose from that meeting. He noted that the Steering Committee for the 2021 Health Policy Retreat reviewed the final report and outcomes of the Retreat on October 7, 2021 and based on that report, which incorporated the pre-retreat environmental scan data, the health policy retreat discussions and the follow-up survey data, the Steering Committee recommended that the Board of Directors approve the following three areas of focus outlined in the Health Policy Retreat recommendations as a starting point for developing the 2022 Advocacy Agenda and as a directive for the appropriate AAD and AADA Councils, Committees and Task Forces to develop more specific strategies:

- Examine the development of patient-centric care model to account for:
  - Accurate and sustainable reimbursement, including for new methods of patient interaction.
  - Strengthening relationships with other specialties and within the House of Medicine to provide coordinated patient care.
  - Clarifying the roles in patient care for Board-Certified Dermatologists and the nonphysician providers in their care team.
- Develop Focused Efforts to Promote Increased Access to Care
   The Health Policy Retreat Steering Committee recognizes that the AAD/A BOD is currently
   addressing of these issues through the DEI program and encourages the BOD to emphasize
   the breaking-down of public health policy barriers, in order to allow Dermatologists to provide
   this access.
- Ownership of Data and Technology
   The Health Policy Retreat Steering Committee recommends that the AAD/A Boards of Directors begin the examining the feasibility of the Academy undertaking a program to take ownership of Aul and data in dermatology.

Dr. Brod then outline the following next steps:

- Reframe the 2022 Advocacy Agenda to highlight the Health Policy Retreat themes
- Plan the 2022 health policy retreat
- Identify the critical issues for future board deliberation

A motion was made and duly seconded to approve the three areas of focus outlined in the Health Policy Retreat recommendations.

**ACTION: Approved** 

# **AADA NEW BUSINESS**

#### Council on Government Affairs and Health Policy (GAHP)

Alternative Physician Payment Models (APMs) for Dermatology Proposal

Howard W. Rogers, MD, FAAD, referred the Board to p. 3 of the Board background materials and presented the Alternative Physician Payment Models (APMs) for Dermatology Proposal. He noted that the Council on GAHP concurred with the Workgroup on Innovation in Payments and Delivery (WIPD) on the need to advocate to the Centers for Medicare and Medicaid Services (CMS) for consideration of an Actinic Keratosis (AK) APM in response to anticipated reductions in Medicare reimbursement for AK destruction under Physician Fee Schedule. The WIPD developed the AK APM

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and the Council on GAHP approved it for submission to the Board for final approval. Dr. Rogers provided a detailed explanation of the rationale for and development of this proposal. He noted that the Board would have another opportunity to discuss the proposal once the strategy for bringing the APM to CMS, including the member communications component have been developed.

After discussion, a motion was made and duly seconded to 1) approve the Alternative Payment Model (APM) for Actinic Keratosis; and 2) develop and execute a strategy for bringing the APM to the CMS for consideration.

**ACTION: Approved; one abstention** 

# **AADA Advisory Board**

AADA05 (S-21) – Opening Opportunities for all Dermatologists – No More Closed Panels Andrew H. Weinstein, MD, MPH, FAAD, referred the Board to p. 4 of the background materials and presented the following resolveds from this resolution:

**RESOLVED**, that the Advisory Board commends the American Academy of Dermatology Association (AAD/A) on its private payer advocacy with insurance companies; and be it further

**RESOLVED,** that the AAD/A redouble their efforts to support and advocate for the private practice of dermatology through fair reimbursement rates and inclusive panels regardless of practice type, because divergent payments and closed panels continue to exist, for new dermatologists.

A motion was made and duly seconded to adopt the resolution.

# **ACTION: Approved**

Proposed Revision to BGP-Relative Value Update Committee (RUC) Representative Stipends Policy Mark D. Kaufmann, MD, FAAD, President-elect, referred the Board to pp. 5-10 of the Board background materials. Dr. Kaufmann stated that Daniel M. Siegel, MD, FAAD had resigned as RUC advisor, and that Alexandra Flamm, MD, FAAD had replaced him. He said Dr. Siegel would serve as the alternate advisor.

Dr. Kaufmann then stated that he was asking Board to approve the RUC Advisor Board Governance Policy that pays RUC team members a per diem stipend for their time at RUC meetings. He noted that the only reason that the RUC Advisor was not already included in the policy was that Dr. Siegel had declined to be included in the past. He also noted that the American Society of Dermatologic Surgery and the American College of Mohs Surgery both paid per diem stipends to their RUC Advisors.

A motion was made and duly seconded to approve the revision to the Board Governance Policy: Relative Value Update Committee (RUC) Representative Stipend Policy to extend a per diem stipend of \$2500 per weekday for attendance at RUC meetings (up to nine days annually) and other related activities to the AADA RUC Advisor.

It was noted that neither the AMA delegates nor the members of the CPT Committee receive per diem stipends for days they are attending meetings on behalf of the AADA and that this disparity should be corrected.

**ACTION: Approved** 

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A motion was made and duly seconded to review the need for stipends for other volunteer positions, including without limitation CPT Committee Members and AMA delegates, and to report back to the Board at its meeting in March 2022.

**ACTION: Approved** 

# **Council on Practice Management**

Teledermatology Standards

Alexander Miller, MD, FAAD presented the Teledermatology Standards in the Council on Practice Management report at pp. 11-13 of the supplemental background materials. Dr. Miller stated that these standards help lay the foundation for the Academy's strategic goal on *Promoting Increased Access to Dermatologic Care – Maximize Responsible Use of Telemedicine*. He also noted that these standards expand upon the appropriate use of telemedicine, create a core set of standards for the Academy to advocate for responsible telemedicine platform technology and telehealth reimbursement, and are a necessary corollary to the AAD/A Position Statement on Teledermatology. However, he noted that there were a few issues that he felt needed to be clarified in the standards and would welcome a referral back to the Council.

A motion was made and duly seconded to refer the Teledermatology Standards back to Council on Practice Management.

# **ACTION: Approved**

Guidance Statement on Documentation of Patient Encounters and Procedures

Dr. Miller referred the Board to pp. 14-17 and stated that the Guidance Statement on

Documentation of Patient Encounters and Procedures was required to be reviewed as it is more
than five years old, and the last version was approved October 23, 2014. The Coding and
Reimbursement Committee reviewed and approved an edited statement.

The statement underwent a robust review with many edits due to the numerous coding and documentation changes that have occurred over the past several years. This edited version was then approved by the Council on Practice Management with no further changes. He noted that several formatting edits to the guidance statement were made to make the language clearer and more concise.

A motion was made and duly seconded to approve the Guidance Statement on Documentation of Patient Encounters and Procedures as presented.

# **ACTION: Approved**

Ad Hoc Task Force (AHTF) on E/M Code Revision Impact

Mark D. Kaufmann, MD, FAAD, President-elect, referred the Board to supplemental page 18 of the Board background materials. Dr. Kaufmann discussed the purpose and activities of the AHTF and the contents of its report.

A motion was made and duly seconded to approve the AHTF on E/M Code Revision Impact report for information only.

**ACTION: Approved** 

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A motion was made and duly seconded for the Association to take the same actions as were taken by the Academy Board of Directors for all applicable reports and actions for information only.

**ACTION: Approved** 

# <u>ADJOURNMENT</u>

There being no further business, Dr. Tomecki adjourned the AADA Board of Directors Meeting at 5:35 (Central).

Respectfully Submitted,

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