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The Great Lakes Association
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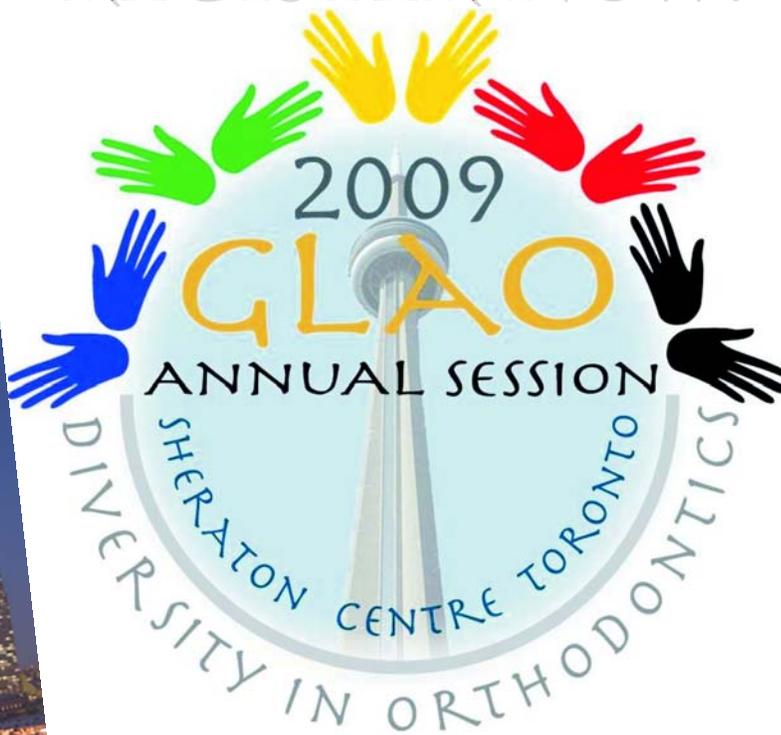


GLAO News

Vol. 45 • No. 2
Fall 2009



REGISTER NOW!



October 29 – November 1

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PRESIDENT'S REPORT



RICHARD M. MARCUS, D.D.S., D. ORTHO

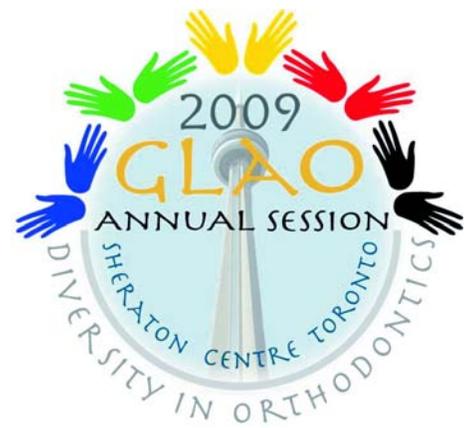
What will you be missing if you don't attend the GLAO Annual meeting in Toronto?

You will miss excellent scientific session speakers — "Tom and Gerry" (Tom Mulligan and Gerry Samson), Ravi Nanda, Tripp Frohlichstein, Jason Cope, Paul Gange and Robert Boyd. Staff will miss talks by Rita Bauer, Carolyn Friedman, Gerry Samson, Tripp Frohlichstein, Paul Gange and Robert Boyd.

You will miss the wonderful social events planned — a President's Welcome Reception on Thursday evening, the Hockey Hall of Fame Event on Friday evening and Wine and Cheese Reception on Saturday evening.

For those from outside Toronto, you'll miss the opportunity to visit Canada's most diverse and cosmopolitan city — shows that will likely be available include "The Jersey Boys," "The Sound of Music," and Andrew Lloyd Webber's "The Boys in the Photograph." Also scheduled are performances by the Canadian Opera Company, including "Madama Butterfly" and "Nightingale and Other Short Fables."

You will also miss the opportunity to enjoy top notch restaurants with cuisine from all over the world - Greek food on the Danforth, Chinese food at



**Sheraton Centre, Toronto, Canada
October 29 – November 1, 2009**

one of the many Chinatowns, Vegetarian, French, Italian...whatever your culinary desire.

There will be the opportunity to walk through our exhibit area, talk with representatives from over 40 different companies and see the latest in all things orthodontic.

For members of the Ontario Association of Orthodontists, there is the OAO Fall General Meeting and Luncheon which will be held on Friday at the Sheraton Centre.

For our U.S. friends, please be sure that you have a valid U.S. Passport, or we will be sure to miss you!

**Don't miss out! Go to
www.GLAO.org and register today!**

For members of the Toronto Orthodontic Club (TOC) or the University of Toronto Orthodontic Alumni (UTOAA) who are not members of the AAO, this will be an opportunity for you and your staff to participate with the GLAO at our three day meeting, at the same registration fees as AAO/GLAO members. The TOC and UTOAA have partnered with the GLAO to incorporate scientific presentations from all three groups. For the non-AAO members, you will discover what an informative and rewarding experience the Annual Session of the GLAO can be.

CONTINUED ON PAGE 23...



JOHN MONTICELLO, D.D.S., M.S.

the proposed health care changes would affect their family, practice and staff.

In January 2009, Rep. John Conyers (D) Michigan, introduced the United States National Health Care Act or the Expanded and Improved Medicare for All Act, HR 676, to make everyone living in the United States eligible for a single payer health care plan. That bill has been referred to committee but elements have appeared in another bill introduced to the Senate by the Democratic Party leaders on February 26, 2009, S486 IS. The American Health Security Act of 2009 would also cover all US residents and would provide for medically necessary treatment and "the full scope of dental services (other than cosmetic dentistry)." This bill is also now in committee, but the financing for both of these plans has emerged in the current presidential plan. Funding will come from existing sources of Federal Government revenues for health care, increasing the personal income tax on the top 5% income earners, an 8.7% payroll excise tax on employers, an additional 8.7% self-employment income tax, an increased 2.2% individual income tax, a tax on all stock and bond transactions and annual congressional appropriations. Whatever legislation becomes law, the funding of universal health care will affect the bottom line for orthodontists. The only reference I have found related to orthodontics and universal health care was on a blog, which stated, "Necessary dental services will be covered, which does not mean everyone will be eligible for clear-aligner therapy." Funding for family orthodontic care will likely continue to

be from discretionary income with an uncertain amount earmarked as a lifetime benefit from a national health plan.

It seems clear from the published percentages of excise, self-employed and individual payroll taxes that we as small business owners will be paying thousands of dollars more each year for our practice's mandated contribution to the Health Care Plan. Will this change the fee structure we currently use? Will the affordable access to orthodontic treatment be compromised and our number of case starts be reduced? Can we continue to employ the full complement of staff we currently enjoy? Can new residents ever hope to pay off their student loans or become a solo practitioner? And can all the members who volunteer countless hours for their component, constituent or national association leadership positions continue giving? Universal Health Care with a one-payer system may be an attractive solution to access to care issues, but the unintended consequences may be even more difficult to manage. Please follow the current political discussion and write your Congress men and women with your thoughts.

As a specialty, we always have the patient's best interests in all of our daily decisions. Regardless of what becomes law, I trust we will adapt and continue treating patients for another 100 years creating healthy smiles.

Hold the dates for our Annual GLAO Session in Toronto. It promises to be both a culturally rewarding and professionally instructive meeting. See you there and BRING YOUR STAFF!

August 2009: As we go to print, the country is discussing the proposed changes to our national health care system. Our Representatives and Senators are now on summer recess and are at home, meeting with individuals and small groups and having town hall meetings to discuss the concept of Universal Health Care and the President's plan. The United States is the only major western country without a national health care plan. Many arguments opposing universal health care point to the Canadian and British plans and the long wait periods for routine procedures in the US such as MRI's and CAT scans. They claim that the same would happen in the US if the system is changed. Age prioritized access to care and end-of-life treatment decisions have also been raised as hot issues.

Although these are all relevant concerns for the general public, what are the concerns of the practicing US orthodontist? Many orthodontists have expressed their concern of how



Visit the Great Lakes Association of Orthodontists website at

www.GLAO.org

for the most current information on GLAO activities.

AAO TRUSTEE REPORT



JOHN BUZZATTO, D.M.D., M.D.S.

The Board of Trustees met April 27-29 and May 6, 2009 in Boston. Following is a brief review of the highlights of the May 12-14 Board Meetings.

Council on Orthodontic Education:

The Board approved: (1) That the following statements be adopted for Monitoring Board Certification in Orthodontic and Dentofacial Orthopedics: a). The program director must prepare graduates to seek Certification by the American Board of Orthodontics. b). The program director must track Board Certification of program graduates, and c). One measure of the quality of an education program must be the success of graduates on the American Board of Orthodontists Certification examination. (2) That the concept for a Society of Educators as an entity of the AAO be referred to a Board committee. **Gene Roberts** – GLAO member.

Committees: The Board approved: (1) A set of criteria that would encourage member participation in related dental and healthcare organizations. (2) An annual peer to peer evaluation is completed for each member of the Board. (3) A set of criteria and benefits be used when evaluating requests for AAO funding outside of the AAO and its affiliated organizations. (4) Revisions to the Council Members evaluation form. (5) That the Council on Governmental Affairs and

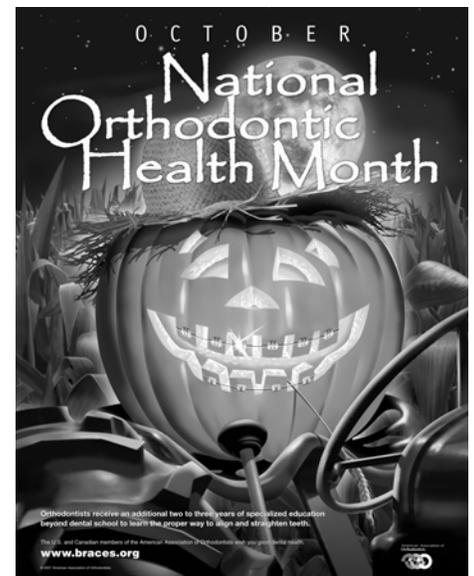
AAOPAC evaluate financial parameters for service on both entities. (6) That a vendor advisory group be established consisting of top executives from various dental and orthodontic manufacturers to interact with a committee of the Board with the goal of exploring sponsorship, education and consumer awareness opportunities.

Other Recommendations: The Board approved: (1) The Breakers Hotel and Resort in Palm Beach, Florida as the site of the 2010 Board Planning Session. (2) That the Councilor of the ADEA Orthodontic Section, be appointed as an advisor to COE and be invited to attend all COE meetings. (3) That AAO request AAOSI to issue a letter of credit, guaranteed by the AAO, in the name of AAOIC in the amount of \$500,000 for the benefit of the Arizona Commissioner of Insurance. (4) A pilot Donated Dental Services (DDS) access to orthodontic care program in Illinois, Indiana, Kansas, New Jersey and Rhode Island. Oregon will serve as an alternate state if necessary. (5) An amended AAO Access to Orthodontic Care White Paper. (6) Investigation of the costs and logistics of an interactive Key Contact portion of the Advocacy section on the AAO website. (7) That the New Member Category Task Force be reappointed to further investigate the following issues: profiling the needs and wants of AAO International members; to develop possible avenues and specific mechanisms needed if International members are to participate in AAO governance; to refine targeted efforts at the recruitment and retention of International members; and make specific recommendations regarding how to maintain an effective AAO presence at international meetings. (8) That the AAO award two \$2500 college or university scholarships to two entrants in a “How Orthodontics Changed My Life” video contest. (9) That the 2011 AAO Education Leadership Conference in Chicago be

designated in recognition of Lionel Sadowsky. (10) Renewal of the agreement with the Academy of Orthodontic Assisting. (11) That Sheldon Baumrind is AAO’s nominee for the ADA Gold Medal Award for Excellence in Dental Research. (12) That \$240,000 is appropriated to allow funding of Faculty First Award Fellowships. (13) A restricted gift to the AAOF to fund the JCEG Task Force. (14) That a copy of the *Legal Handbook* be sent to all orthodontic programs.

Surveys: The Board approved: (1) Class I Treatment and Polishing surveys by Dr. Brian Webb, a first year resident at LSU. (2) Demographic survey by Dr. Asha Madhavji, SLU orthodontic resident

Meetings: The following is a list of meetings that I have attended since the February 2009 Board Meeting: February 28th, AAOF meeting, St. Louis; March 2nd, Affiliation Agreement conference call; March 18th, COMEJC conference call; March 21st, GLAO ad interim meeting, Niagara on the Lake; March 30th, BOT conference call; April 6th, Advocacy Task Force conference call; April 20th, AAOF conference call; April 21st, GLAO conference call.



Summary of the 2009 AAO House Resolutions

The 109th Annual Session of the American Association of Orthodontists was held May 1-5, 2009 in Boston, MA under the leadership of President Raymond George. A summary of the actions from the House of Delegates which met Friday May 1st and Monday May 4th follows.

Budget: The projected budget at the conclusion of the House showed \$20,221,599 in revenue and \$22,585,114 in expenses for the fiscal year which will end May 31, 2010. This results in a \$2,363,515 deficit, \$2,320,000 of which is additional funding for the consumer awareness campaign. The House decided to maintain dues at \$745 and fund the deficit from excess reserves. In addition we have begun the 2nd year of a 3 year \$550 assessment to fund the consumer awareness campaign.

Reference Committee #1: The House approved: (1) Bylaws Amendment, Article XVII, B.2.b. with the inclusion of “ *In cases involving a third-party complaint alleging violation of this Association’s Principles of Ethics against any Trustee, officer or member elected or appointed to any position of responsibility within this Association that involves the conduct of such Trustee, officer or member in the performance of duties in such capacity, the Investigating Committee shall dismiss the complaint unless the conduct of such Trustee, officer or member constitutes a violation of this Association’s Principles of Ethics as a result of gross negligence or intentional conduct. If the Investigating Committee determines that insufficient information exists, the complaint is patently frivolous or inconsequential, or that the foregoing standard is not satisfied in the case of a complaint involving any Trustee, officer or member referenced above,*”. (2) Changing the Council on Information Technology to a Standing Committee of the Board. (3) Requiring ADA membership only at the time of

application for AAO membership. (4) Elimination of dues and assessments for individuals that have been members in good standing of the AAO for at least fifty cumulative years. (5) Elimination of the requirement for private practitioners to serve on the Council on Orthodontic Education.

Reference Committee #2: The House approved: (1) Revisions to the *Clinical Practice Guidelines for Orthodontics and Dentofacial Orthopedics 2008*. (2) Inclusion of “*Operating, Marketing and Cost Management of an Orthodontic Practice*” as the 7th Critical Issue to the Strategic Plan. (3) Amendments to the Strategic Plan. (4) Amending the AAO’s Principles of Ethics and Code of Professional Conduct by adding “ *In addition to other rules, in any public statements, announcements of services, and promotional activities, all claims made or utilized by members must be supported by scientifically reliable evidence*” and clarifying provisions in all promotional activities and public announcements. (5) The existence of Affiliation Agreements between the AAO and constituents and between constituents and components. (6) That the AAO shall not allow its proprietary public relations materials, advertising materials, public awareness materials or public service announcements to be modified to communicate specific fees, including “no charge” or “free” for any or all services/treatment related to orthodontic therapy. (7) That the AAO, through the Councils on Orthodontic Health Care and Governmental Affairs, investigate supporting state and federal legislative efforts to discourage insurance companies from utilizing stated orthodontic benefits for payment of ancillary procedures such as, but not limited to, dental extractions, cleanings, uncovering impacted teeth, and periodontal crown lengthening. (8) That the AAO Board of Trustees contact the American

Academy of Pediatrics(AAP) to explore a partnership between the AAO and the AAP in their “oral health care initiative”.

Reference Committee #3: The House approved: (1) That the Public Awareness Campaign be funded by an additional \$2,320,000. (2) That beginning in FY 2011, the AAO Membership Directory be produced updated and made available to all members via www.aaomembers.org and further, that the directory also be made available upon request in an electronic media (i.e., CD-ROM) format at no charge for AAO members. (3) That the AAO develop an aggressive national public relations program to educate human resource professionals on: The value of orthodontic coverage for both adults and children; the process of evaluating comprehensive orthodontic dental insurance benefits, and the strategy necessary to successfully negotiate comprehensive, high quality orthodontic coverage. (4) That American Association of Orthodontists Services Inc. be requested to study the issue of student debt and investigate an expansion of AAO financial services including: Financial counseling; providing student loans and starting a credit union or other similar financial institution. (5) The Voluntary Certification Program for Orthodontic Assistants’ business plan.

The GLAO was instrumental in the extremely successful 109th Annual Session in Boston. Both GLAO resolutions: (1) That the AAO shall not allow its proprietary public relations materials, advertising materials, public awareness materials or public service announcements to be modified to communicate specific fees, including “no charge” or “free” for any or all services/treatment related to

CONTINUED ON PAGE 7...

GLAO Trustee to the American Association of Orthodontists to be on the 2010 Ballot

DR. JOHN BUZZATTO

I find it hard to believe that I have begun my fourth and last 2 year term as GLAO Trustee in Boston. It has been an honor and privilege to serve the GLAO membership in this capacity. The election to select the individual to follow me will occur next summer and I was asked to write a brief job description for those who may be interested in running.

Composition: The Board of Trustees consists of one (1) Trustee from each of the eight (8) constituent organizations, the President-Elect, the President, the immediate Past President, the Speaker of the House and the Editor-in-Chief. The eight Trustees and the President-Elect constitute the voting members of the Board, except that the President may vote in the event of a tie.

Qualifications: A Trustee shall be an active member of the AAO.

Term of Office: The term of office of a Trustee is two (2) years with the consecutive tenure being limited to eight (8) years. The Nominating Committee composed of the voting members of the Board of Trustees, nominates the most senior Trustee to serve as Secretary-Treasurer and he must be elected by the House of Delegates. The Secretary-Treasurer, upon completion of his one year term of office, automatically assumes the office of President-Elect for one year and then automatically assumes the office of AAO President. The immediate Past President serves an additional year on the Board of Trustees but without the right to vote which culminates in eleven (11) year tenure on the Board of Trustees.

Powers: The Board of Trustees is the managing body of the AAO, vested with full power to conduct all

business of the AAO, subject to the laws of Missouri, the *Articles of Incorporation*, the *Bylaws*, and the mandates of the House of Delegates. Other powers include: Establish rules and regulations not inconsistent with the *Bylaws* to govern its organization and procedure; Exercise full discretion in any official publication of the AAO; Establish *ad interim* policies when the House of Delegates is not in session, provided that all such policies be presented for review at the next session of the House of Delegates; Establish an executive Committee composed of five members: President, President-Elect, Secretary-Treasurer and the two most senior Trustees, to act for the full Board of Trustees in the interim between sessions of the Board, provided such actions are reported to the Board; Employ an Executive Director; Appoint consultants and nominate honorary members.

Duties: It is the duty of the Board of Trustees to: Provide for the maintenance and supervision of the executive office and all property owned or operated by the AAO; Appoint an Editor-in-Chief of the AJO-DO; Determine the time and place for each AAO Annual Session; Cause to be bonded by a surety company all officers and employees of the AAO entrusted with Association funds; Cause all accounts of the AAO be audited by an independent certified public accountant at least once a year; Prepare a budget for carrying on the activities of the AAO for each ensuing fiscal year; Submit to the House of Delegates at the opening meeting of the annual session nominations for council membership; Transmit to the House of Delegates a nominee for the Director of the American Board of Orthodontics; Appoint annually, the

chair of each council from nominations submitted by the respective councils, and designate one member of the Board to serve as a liaison, without the right to vote, on each AAO Council; Review reports of the councils and committees of the Association and make recommendations to the House of Delegates; Determine the honoraria for members of the Board of Trustees provided that any recommended change in honoraria be presented in writing at the previous meeting of any session of the House of Delegates; Submit an annual report of its activities to the House of Delegates; Serve as a nominating committee for the elective officers of the AAO; Elect service and international members and perform such other duties as may be prescribed by the *Bylaws*.

Meetings: The Board of Trustees meets regularly in February, August and November at the AAO Headquarters in St. Louis. The Board additionally meets before and after the AAO Annual Session in the city of the meeting. A Board Planning Session for scanning occurs each summer in a location selected by the President-Elect. The Board is also requested unless mandated by the President to attend: AAO Leadership Conferences, AAO Governmental Affairs Conferences, AAO Mid-winter Conferences, ADA Meetings and World Federation of Orthodontists (WFO) Meetings (every 5 years). Each Trustee is assigned a Council (which meets once or twice a year) and represents the Board at their respective meetings. Additionally, the GLAO trustee attends the GLAO Annual Session and an interim meeting each year while also serving on the GLAO Board (voting member) and Executive

and Finance Committees. The AAO officers annually meet with the ADA officers, Dental Specialty Group officers, attend the open session of the Council on Dental Accreditation meeting and represent the AAO in Washington, DC, or elsewhere when needed. All officers attend each of the eight constituent meetings once while representing the AAO. The President usually travels to the European Orthodontic Society meeting and one other international meeting representing the AAO. Conference calls are frequent for the Board, as are deciding issues by mail ballot between regularly scheduled Board meetings. Generally, the longer one serves on the Board the greater the time commitment as he/she chairs committees, taskforces, prepares for his/her AAO Annual Session and acts as liaison to outside entities such as: American Association of Orthodontists Foundation (AAOF), College Diplomates, American Board of Orthodontics (CDABO), Canadian Association of Orthodontists (CAO) and others.

Personal Observations: Although any active member may serve as Trustee, experience with AAO governance would be most beneficial and a prerequisite for office in my opinion. This would include serving in the House of Delegates, AAO Council, on the GLAO Board or as a GLAO Officer. The time commitment is daunting and even though an honorarium is provided, it does not replace productive time in the office. As the second most senior Trustee, I am scheduled to be out of the town 83 days this year with 53 being patient days and this does not include the time preparing for each meeting. This time away has been the most to date and will increase if I am elected by the House of Delegates as Secretary-Treasurer at the AAO Annual Session in Washington, DC. I have treasured my time as your representative on the Board of Trustees as I have made many friends within the GLAO, throughout Canada, the United States and even internationally. However, I

have missed children's sporting events, high school proms, birthdays and other family obligations that I regret. The GLAO has more than a few qualified individuals that have the passion and leadership skills required to serve as our next Trustee; the question of time is probably the greatest challenge. Again, it has been an honor and privilege to serve the membership of the GLAO as Trustee and I look forward to mentoring the individual elected to follow me.

Nominations for the position of AAO Trustee may be made from the floor at the GLAO Annual Business Meeting, to be held on October 31, 2009 at the Sheraton Centre Toronto. A nominee's eligibility and willingness to serve will be confirmed by the GLAO Board of Directors. All candidates will be permitted up to five minutes at the meeting to address the members present.

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2009 AAO House Resolutions

CONTINUED FROM PAGE 5

orthodontic therapy. (2) That American Association of Orthodontists Services Inc. be requested to study the issue of student debt and investigate an expansion of AAO financial services including: 1) financial counseling; 2) providing student loans; and 3) starting a credit union or other similar financial institution were passed on the consent agenda. GLAO delegates/alternate delegates included: **Steve Belli, Jeff Berger, Bob Good, Ron Good, Jerry Hickman** (Reference Committee #2),

Richard Marcus, John Monticello (Committee on Bylaws), **Greg Oppenhuzin, Chris Roberts** (Delegation Chairman), **Gene Roberts** and **Michael Sherman** (Committee on Rules and Order). **Tom Ahman** presided as Speaker of the House.

Kate Vig received the 2009 Albert H. Ketcham Memorial Award. This prestigious award is presented to an individual who, in the judgment of the ABO, has made a notable contribution to the science and art of orthodontics.

Council on Governmental Affairs

DR. M. DONALD HAYES

The Council on Government Affairs met on Monday June 22 through June 24 in Washington D.C. Meetings were held with our legislative counsels at Patton Boggs regarding congressional consideration of health-care reform and AAO response. Council members also participated in a number of Capitol Hill visits with legislators and staff.

As Congress approaches the August district work period, resolution on health care reform becomes less and less clear. Early in the process, President Obama delivered a deadline for House and Senate action before the August recess. With bipartisan negotiations in the Senate taking more time than desired and the Blue Dog Democrats objections in the House, it is more likely that neither chamber will hold a floor vote until Fall, likely in late September.

In the Senate, the Finance Committee and the Health, Education, Labor and Pensions (HELP) Committee have been working for months to produce a final package that will then have to be merged for floor consideration. HELP, under the temporary leadership of Sen. Chris Dodd (D-CT) while Sen. Ted Kennedy (D-MA) recuperates, held a multi-week long markup session and approved the Affordable Health Choices Act on July 15. The bill would establish health insurance “gateways” in every state to offer a range of insurance options including private plans as well as a community health insurance option. The bill includes both an employer and individual mandate, excluding employers with fewer than 25 employees. The bill also includes a number of dental health programs such as enhanced funding for training in public health dentistry and an alternative dental health care provider demonstration project. The

Congressional Budget Office (CBO) has scored the bill at \$615 billion over 10 years.

The Senate Finance Committee has publicly committed to a bipartisan process, which has been slowed in response to an initial score over \$1 trillion. The committee wants to reign in spending and keep the cost of health reform under the \$1 trillion mark, and is continuing negotiations with a small group of key committee members. The “gang of six” includes Democrat Chairman Max Baucus and Democratic Senators Jeff Bingaman (NM) and Kent Conrad (ND) as well as GOP Senators Mike Enzi (WY), Olympia Snowe (ME) and Finance ranking member Chuck Grassley (IA). Both Republicans and Democrats report that negotiations are going well, but have requested more time to carefully put together a bipartisan compromise. Members are wrestling with several major issues including whether to create a National Health Exchange or to offer insurance options through local, non-profit co-ops. They are also struggling on whether the public plan option is necessary or cost-prohibitive. Members are considering a wide range of revenue-raisers to pay for the bill including taxing health benefits, limiting the deduction for charitable giving, surtaxes, etc., but consensus has not yet been reached. The AAO submitted comments to the Finance Committee on both the employer mandate as well as small business tax credits (among other issues). As the Senate adjourned for the August recess August 7, Chairman Baucus announced that the Finance Committee does not want to rush the bipartisan process, has not completed their negotiations and therefore will not markup until September.

The House adjourned late Friday, July 31st after a long summer of health reform activities. Two of the three “Tri-Committees” completed markups and reported amended health reform bill favorably in mid-July (House Ways & Means and Education & Labor). The House Energy and Commerce Committee hit unexpected road blocks from both the fiscally conservative Blue Dog Democrats, as well as the liberal Progressive Caucus. The Energy and Commerce markup began on July 16th, but the Blue Dog Democrats expressed concerns that the bill did not effectively bend the cost curve of health care services in the future. Chairman Waxman postponed the markup to allow for negotiations with the Blue Dogs and House Democratic Leadership to reduce the overall cost of health reform package as well as address outstanding concerns about the public plan option and the impact on small businesses.

A deal was reached that would trim \$100 billion from the score of the package and included the following provisions: language that makes the public plan optional, requires the public plan to negotiate rates with providers rather than based on Medicare rates, enhanced exemptions for small business to annual payrolls of \$500,000 with the penalty phased in up to \$750,000, among others. In response, the liberal Progressive Caucus voiced objections to compromise, vowed to oppose any bill without a strong public plan option with 57 Democratic members sending a letter to Speaker Pelosi. Chairman Waxman then began another round of intense negotiations with both the Blue Dogs and Progressives to reach a compromise deal that could garner enough votes to move a health reform through the Energy and Commerce Committee. The markup reconvened

on Friday July 31st with a number of amendments offered and approved including the Blue Dogs omnibus amendment (deal) as well as Cong. Eshoo's Follow-on Biologics amendment that would give base exclusivity of twelve years to innovators with potential add-on periods for new indications. Following discussions with Chairman Waxman and House Democratic Leadership, the Progressive also offered a series of 'unity' amendments that would bring back the support of the Committee's liberal Democrats.

The approved amendments would:

- Require that the public plan use a drug formulary to control prices;
- Establish an Accountable Care Organization (ACO) pilot program if Medicare is expanded to include Medicaid;
- Pharmacy benefit managers (PBMs) would be subjected to additional transparency requirements;
- Require CMS to simplify administrative procedures (pay claims electronically, etc.);
- Require the Secretary of HHS to negotiate prescription drug prices under Part D;
- Insurance plans in the exchange (including public option) must receive prior approval from government before increasing insurance premiums over a certain amount; and
- All savings generated by this package must go toward making premiums more affordable for lower-income people in the health insurance exchange (i.e. offsetting the Blue Dogs' reductions in premium subsidies under their amendment).

Late Friday July 31st, the House Energy and Commerce Committee reported H.R. 3200 as amended out of committee by a vote of 31-28. Democratic Cong. Melancon, Barrow, Matheson, Stupak, and Boucher voted against the bill.

The three bills reported out of each Committee will have to be merged, so we expect House Democrats to continue health reform discussions over the August recess to determine a strategy to reconcile their differences. Speaker Pelosi plans to bring the bill to the floor in September, but House members must first merge the bills and earn enough support within the Caucus to guarantee a successful floor vote. There is also some angst among House Democrats who have taken difficult votes on both the stimulus bill and energy reform (cap and trade) who will not be easily pressured to support a health overhaul bill that could be unpopular in their districts.

August recess is expected to be filled with health reform town halls and strong PR activities from the Administration. It is hoped AAO members will have participated in these events to promote the interest of orthodontists and small businesses. AAO members could attend town hall meetings over the August break on behalf of the AAO to speak about our issues including FSA's (Flex Spending Accounts). Members of Congress and the Administration used the recess to educate and "sell" the Democrats health reform plan and host town hall meetings for the constituents in their districts. AAO members could call their district offices to find out the schedule of town hall meetings in their district.

Once health care legislation passes in the House & Senate, the plans will not be identical and have to go to a Conference Committee composed of members of both House & Senate for formulation of a compromise bill on Health Care Reform before final Congressional consideration.

According to *The Washington Post*, "a majority of Americans see government action as critical to controlling runaway health-care costs, but there is broad public anxiety about the potential impact of reform legislation

and conflicting views about types of fixes being proposed on Capital Hill," according to a new *Washington Post*/ABC News poll.

"Most respondents are 'very concerned' that health-care reform would lead to higher cost, lower quality, fewer choices, a bigger deficit, diminished insurance coverage and more government bureaucracy. About six in ten are at least somewhat worried about all of these factors, underscoring the challenges for lawmakers as they attempt to restructure the nation's \$2.3 trillion health-care system."

Part of the reason so many are nervous about future changes is a fear they may lose what they currently have. More than eight in 10 said they are satisfied with the quality of care they now receive and relatively content with their own current expenses, and worry about future rising cost cuts across partly lines and is amplified in the weak economy.

President Obama, in a news conference on June 23rd, sought to leverage that apprehension. "Premiums have been doubling every nine years, going up three times faster than wages," he said. "So the notion that somehow we can just keep doing what we are doing, and that's okay, that's just not true." President Obama has sought to rebut criticism of one of the more contentious ideas being considered: creation of a government-sponsored health insurance program that would compete with private firms. Insurers and many Republicans warn that the "public option" included in bill filed in the House and Senate "would dismantle employer-based coverage, significantly increase costs" and add to the federal deficit. President Obama said "If private insurers say that the marketplace provides the best quality health care; if they tell us that they're offering a good deal, then why is it that the

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government, which they say can't run anything suddenly is going to drive them out of business?" Obama says "That's not logical."

In *The Washington Post* poll, 58 percent said they see government reform as necessary to stall skyrocketing costs and expand coverage for the uninsured, while 39 percent say they fear any federal action would do more harm than good. The numbers split sharply along partisan and ideological lines: Ninety-two percent of liberal Democrats said they see government intervention as essential, compared with 19 percent of conservative Republicans.

Beltway." It is unclear if whether that muscle will make a difference in the struggle over health care, President Obama's toughest legislative challenge since reaching office. Such campaign tactics have not been tested in the policy arena, where clarity is elusive and success depends on the calculations of 535 elected congressional representatives.

Senator Orin Hatch (R-Utah) said, "The only way this health care reform can work is if Democrats distort the facts." "They want to rush this through before president Obama drops in the polls. What they don't seem to realize is they are causing him to drop in the polls."

Gregory further states Healthcare reform is the reason for his decline. President Obama charted the course for healthcare reform in congress. They missed his deadline. Presidents are evaluated on their accomplishments. So when Presidents involve themselves and their prestige in the legislative arena it is not a pretty process. President Obama has recently threatened to force a final vote on healthcare reform strictly along party lines! Is it a political process the American public will approve?

Whether this public action of campaign volunteers can shift votes or incite action on Capital Hill remains to be seen. Senator Sherrod Brown (D-OH), recalling "Harry and Louise" ads, said the campaign beyond the beltway "worked in '93 to stop reform and it's going to work this year to nudge reform forward." Senator Brown has appeared with the Health Care for America Now (HCAN), which has raised more than \$35 million in the past two years and deployed more than 120 paid organizers in 43 states. (HCAN) National Campaign Manger Richard Kirsch said the group considers health-care reform "a national fight," not a series of skirmishes over swing votes in Congress. When a prospective congressional supporter strays, he said, the organization generates a hail of letters, calls and e-mails back home. President Obama has said in e-mails to news and supporters, "Once again, victory is far from certain," "To prevail, we must once more build a coast-to-coast operation ready to knock on doors, deploy volunteers, get out the facts, and show the world how real change happens in America."

It is widely believed in health care there are three main issues; cost, quality and quantity of care. It is only possible to affect two of the three and the third reacts to the changes in the two you've chosen. President Obama

The Washington Post/ABC News Poll

How concerned are you, if at all, that current efforts to reform the health-care system will:

	Total Concerned	Very Concerned
• Increase your health care cost	84%	62%
• Sharply increase the federal budget deficit	84%	56%
• Reduce you health insurance coverage*	82%	55%
• Reduce the quality of health care you receive	81%	58%
• Limit your choices of doctors or treatments	79%	56%
• Increase government bureaucracy in health care system	78%	51%

* among those with insurance

The Washington discussion, focused on high cost and uncertain results of competing proposals, in general the tentative discussion does not seem to be going in the direction President Obama, might wish. As a result he has sought to energize the vast campaign network which helped him win the election, to mobilize vote support for his point of view. Virginia governor Timothy M. Kaine, who is chairman of the Democratic National Committee (DNC), called for a "sense of urgency" on health care reform. He described Organizing for America (OFA), as a successor to Obama's ubiquitous campaign network, as political "muscle outside the

On August 7th NBC commentator David Gregory quoted the following polls:

President Obama's Approval Ratings

CNN Poll:

	04/09		08/09
Approval:	61%	to	56%
Disapproval:	35%	to	40%

Quinnipiac University Poll:

	07/09		08/09
Approval:	57%	to	50%
Disapproval:	30%	to	42%



Council on Membership, Ethics and Judicial Concerns

DR. RICHARD M. MARCUS

At the recent House of Delegates in Boston, COMEJC proposed and the House agreed that Life Active members of the AAO should be honoured and retain their membership to the AAO. Those members who have been with the AAO for 50 or more cumulative years should be rewarded for their commitment to dentistry, orthodontics, and their patients. At this stage of their careers, many have significantly reduced practices with significantly reduced incomes and are phasing out of their practices. Therefore COMEJC submitted Bylaws amendments to the HOD which were approved to provide Life members who accumulate 50 or more years of membership exemption from all dues and assessments. They will also continue to receive the AJO-DO. Our Council is currently exploring other benefits which might be extended to Life Active members.

The Board of Trustees directed COMEJC to consider a late fee penalty and payment plan options. The

Council recommended not implementing a late fee, however, did recommend adding dues installment payment options of three and six months, which began June 1, 2009.

COMEJC and the Council on New and Younger Members were asked by the BOT to review the ADA Membership requirement. Both Councils recommended, and the HOD approved, a change to alter the ADA membership requirement so that AAO members must be an ADA member in good standing on the date of application as an active, affiliate, student or service member. This change requires all AAO members to be members of the ADA initially. It is then the AAO member's decision to retain or not retain ADA membership.

The largest growth in AAO membership is in the International category. Our Council has a sub-committee exploring ways of addressing the needs of this group. It is also working to see how the AAO

might continue to expand the numbers of international members.

Amongst the matters that COMEJC will be studying this year, is that of dues and assessment waivers. Our goal will be to provide guidelines which will be as comprehensive, consistent and equitable as possible. COMEJC will be presenting our report to the BOT for their November 2009 meeting.

The COMEJC is the Council which receives complaints lodged against members, by both other members and the public. The details of these complaints is strictly confidential, but it may be instructive for members to be aware of the broad categories which seem to draw many of the complaints.

One area is the refusal or non-timely transfer of orthodontic diagnostic records; another area is the possible inappropriate promotional/ advertising activities of members. A third area, not surprisingly, relates to dissatisfaction with treatment results.

Council on Governmental Affairs

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has distilled his position to three principles: to reduce cost in health care, insure quality and provide choice, including public insurance option. In other words in order to reduce cost and increase quality of care, care will have to be rationed at some extent. Perhaps it might be mentioned in Great Brittan's National Health Insurance dialysis is not allowed for anyone over 55 years old.

It is very clear that if the Democrats are successful in health care reform there will be major changes in health

care in America, which will undoubtedly effect directly and indirectly the practice of Orthodontics. Check the AAO member's website for updates. Without question the time is now for vigilance and action. Each of us should be PAC contributors and key contacts to be sure that our positions are heard in Congress as health care reform is considered.

(Material in this article comes from July 24th and August 3rd memorandums from Patton Boggs LLP for the American Association of Orthodontics and a June 24th article in The Washington Post on Health Care Reform.)

Council on Communications

DR. ROBERT F. GOOD, II

Actions of the Council on Communications – July 2009:

- The Council recommended to the Board of Trustees that the purpose of the public awareness campaign be re-stated and that the new purpose be to increase market share through public awareness.
- The Council is studying ways to measure how the public awareness campaign affects market share.

Council on Orthodontic Education

DR. W. EUGENE ROBERTS

2009 AAO Deans Luncheon

The AAO sponsors this luncheon annually at the American Association of Dental Education (ADEA) meeting. The speakers this year were Dr. Karen West, Dean of the UNLV and Dr. Larry Jerrold, Dean and Program Director at Jacksonville University. They discussed the financing of graduate orthodontics education, from the perspective of institutions that had received substantial corporate and foundation funding which was subsequently withdrawn. Both programs have survived by returning to tuition and clinical revenue funding. The discussion focused on the widely varying amount of educational expense that is borne by the students at different institutions. Some universities have increased tuition dramatically over the past 20 years while others charge no tuition and pay a stipend. The differences appear to reflect the relative financial independence of the program from the dental school, long-term agreements with administrators, and effective generation of clinical revenue.

2009 Bob Isaacson Educational Leadership Conference

The conference honored the many educational accomplishments of Dr. Isaacson. Because of his broad range of experience, Bob was asked to present the keynote address: "Leadership in Academic Orthodontics." The conference featured a report on current COE activities with an emphasis on student debt and declining career opportunities. Additional reports were presented on the AAOF, ABO, and the Task Force on the Recruitment and Retention of Faculty. The discussion focused on the best

strategies to reach individual deans and senior institutional administrators. The problems of student debt and restricted career possibilities are serious concerns for educators. It was announced that the 2010 conference will honor Dr. Kate Vig.

Craniofacial Anomalies and Special Care Fellowships

On January 30, 2009 CODA approved accreditation for Craniofacial Anomalies and Special Care Fellowship programs to be implemented July 1, 2009. These are new programs that will require accreditation applications by the host institutions. The fellows may be eligible for graduate medical education (GME) funding. It has not yet been determined if AAO funding will be pursued for individual fellowships.

Society of Orthodontic Educators

A national orthodontics educators' society has been proposed and bylaws have been drafted to reflect the following: "The purpose is to shape the future of orthodontics by fostering improvements in clinical education and research related to orthodontics. It will monitor and respond to developments in training, accreditation, credentialing, manpower, financing, and other issues affecting orthodontic education. It shall provide a forum for orthodontic educators in accredited institutions to share, discuss, and learn about issues of common interest, and shall also provide a voice for educators in the AAO leadership." COE has referred the proposal to BOT.

SNODENT

Systematized Nomenclature of Dentistry (SNODENT) is being pursued by the ADA Standards Committee on Dental Informatics (SCDI). SNODENT is a fundamental requirement for electronic patient records. SCDI efforts are compatible with making patient records interoperable and transportable. Several SCDI sub-groups are at work on digital imaging of all kinds including light and ultrasound, forensic data, and other topics. The document on DICOM standards was approved and is now available for public comment, as is a report on structured display. According to federal announcements, the implementation date for electronic patient records is 2014 and there will be a new internet system that will be secure for private health information (HIPAA). COE has requested that BOT appoint Dr. Carla Evans, a former COE member, as a SNODENT consultant because of her extensive experience in this area.

Student Debt

Dr. Roberts presented the GLAO environmental scan on student debt and potential solutions. COE joined GLAO and NESO in a resolution submitted to the HOD for AAO Services to study potential solutions to the student debt problems. The resolution passed the HOD on the consent agenda. There is a compelling need to deal with this problem as soon as possible. Currently, students exhaust the low cost, federally insured loans during dental school and must depend on private loans ($\geq 8.5\%$ interest) for graduate training. Many lenders have left the market and the remaining lenders are having difficulty raising

Council on Orthodontic Health Care

DR. ROBERT J. BROWN

adequate funds to loan at a favorable rate. Debt will dramatically increase in coming years. AAO and/or AAOF help with student debt management would be a compelling benefit of AAO membership.

MATCH Violation Guidelines

Most graduate orthodontics programs utilize the MATCH service for accepting applicants for available positions. The process is used by essentially all medical residencies and most other dental specialty programs. After the initial candidate selection and interview process, all MATCH programs submit a list of acceptable candidates in order of preference. Each candidate also submits a list of desirable programs in order of preference. A computer system then matches the highest preference of a candidate to the highest preference of a program. In effect, the students are matched to the programs, in order of mutual preference. This method is a fair system for both the candidates and the programs. However, students and institutions must sign an agreement that they will comply with the MATCH results. There has never been a problem in orthodontics until last year when a student who matched for a General Practice Residency did not comply because he later decided to accept an orthodontics fellowship. In the absence of a formal MATCH policy, COE used the guidelines of other dental specialties and recommended that the student be barred from the next match for graduate orthodontics admission. At the fall meeting in St. Louis, COE will consider a specific orthodontics MATCH violation policy, similar to that used by other dental specialties.

The Council on Orthodontic Health Care was called to order at the AAO Headquarters in St. Louis, Missouri on July 11, 2009 at 8:14 a.m. CDT. Present were: Dr. Stephen Robirds, Chairman; Dr. Robert Brown; Dr. Jean Asmar from MASO and substituting for Dr. David Drake; Dr. Gregory Hoeltzel; Dr. William Kochenour; Dr. Norman Nagel from PCSO and substituting for Dr. Robert MacLean; Dr. Paul McKenna; Dr. Robert Prince; Dr. Hugh Phillis, Board Liaison; and Ms. Ann Sebaugh, Staff Liaison.

DBAS Report AAO Member Hotline

The Dental Benefits Advisory Service (DBAS) Report was received by Ms. Ann Sebaugh. It was noted that the overall number of Hotline calls had increased slightly over the past year. The majority of Hotline calls received continued to deal with CDT coding questions. The overall number of callers with questions about medical coding increased while complaints about third party payers decreased. Hotline statistics were as follows:

- 46% of calls relate to CDT coding issues
- 30% of all calls relate to reimbursement issues
- 12% of all calls relate to all other issues (NPI numbers, Red Flags Rule, HIPPA, etc.)
- 11% of all calls relate to medical coding issues
- 1% of all calls relate to electronic claims issues

Fraud Article in AAO Bulletin

Ms. Sebaugh reported that, based on the upturn in dishonesty reported in practices, an article on fraud prevention was published in the April 2009 issue of the AAO *Bulletin*. It was

also suggested that webinars might be an effective medium for disseminating fraud prevention information to orthodontists. Additional suggestions were as follows:

- Potential speakers on fraud prevention via webinars or at Annual Session and Constituent meetings
- Webinars or doctor-only presentations should be held to preclude employees from learning strategies to commit fraud
- If webinars are conducted, hold 2 sessions in the evenings; for member convenience, one session should be offered in the Eastern and Central time zone and an additional session offered in the Mountain/Pacific time zones

Coding Education

Ms. Sebaugh reported that Dr. Doug Depew offered his coding presentation, "Navigating the World of Insurance Coding during the 2009 Annual Session in Boston. The session was well attended, and in addition to Dr. Depew, Ms. Sue Jones, Office Manager of Depew Orthodontics and Ms. Ann Sebaugh, AAO Dental Benefits Advisory Service Manager served as panel experts during the question and answer portion of the program.

National Insurance Guide

Ms. Sebaugh reported that a listing of insurance company websites and a resource for payer information has been added to the chapters on electronic claims submission and patient eligibility confirmations. When research is complete, information will be included to address electronic claims submission

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if providers don't accept assignment of benefits.

It was noted that the state of Minnesota now mandates that all dental claims be submitted to payers electronically. In preparation for the likelihood that other states will follow suit, the council believes that efforts to educate AAO members on all aspects of Electronic Data Interchange (EDI) using all available media types is important and will be pursued.

AAO Code Task Force

Dr. McKenna provided an overview of the code revision requests that are under consideration by the ADA Code Revision Committee (CRC) in Batch 2 for the 2011-2012 version of the Code. In addition, Dr. McKenna noted that the next CRC meeting will take place in Chicago on August 14-15, 2009. A Dental Specialties meeting will be hosted by the American Academy of Periodontology (AAP) on Thursday, August 13, 2009. This meeting will follow the ADA Dental Specialty meeting and will precede the CRC meeting.

Dr. William Kochenour provided COHC substitute council members with a brief description of recent AAO coding initiatives. Dr. Kochenour noted that, with the AAO BOT approval, the AAO Code Task Force had submitted a coding request to condense codes from the Limited, Interceptable and Comprehensive categories into a smaller, streamlined orthodontic code set. After further consideration, the AAO BOT requested that the code request be withdrawn with concerns over how the action might ultimately affect benefit payments and orthodontic provider fee schedules.

Drs. Kochenour and McKenna further noted that members of the CRC expressed that AAO is now perceived

by their CRC peers as being "team players" in the coding process.

The council discussed attendance at the CRC and other dental related meetings by council code committee representatives. Due to the length of some of the dental meetings, it has become increasingly difficult to take practice time to attend the meetings and represent the AAO.

Traditionally, AAO representatives attend the American Association of Dental Consultants (AADC) meeting that is held in May of each year. For the past several years, the AADC meeting has overlapped the AAO Annual Session, making attendance difficult. The 2010 meeting is scheduled to be held May 6-8, 2010 in San Diego, CA. The council feels attendance at this meeting is beneficial and has suggested that it might be worthwhile for an AAO BOT member to attend the meeting as well. Dr. Phillis will query the BOT regarding whether attendance at this meeting is feasible.

Drs. McKenna and Kochenour are planning to represent the AAO at the annual meeting of the National Association of Dental Plans (NADP) that will be held September 22-25, 2009 in Scottsdale, AZ.

Systematized Nomenclature of Dentistry (SNODENT) Task Force

Ms. Sebaugh reported that the list of orthodontic diagnostic concepts that will be carried forward for use in electronic health records was approved by the AAO BOT. The Task Force has forwarded the list of concepts to the Council on Education who will develop definitions for each of the concepts.

Dr. Nagel noted that one of the major objectives of SNODENT is to break

down each dental visit into the following components: procedure code, procedure rendered to patient and total time of patient visit. SNODENT will allow each of these components to be captured and stored electronically as part of the patient's treatment record.

Position Paper-Payers Deducting Extractions from Lifetime Benefits

In response to an AAO DBAS Hotline caller who expressed concern over payer bundling of ancillary services relative to the orthodontic benefit, the council drafted a position paper to address the issue. After BOT review, COHC was requested to provide clarification and confirmation of some elements of the paper. Dr. Greg Hoeltzel will draft a revised position paper for COHC review and submission to the BOT by their August, 2009 meeting.

AAO Donated Orthodontic Services (DOS) Program

Dr. Phillis reported that, during their May 2009 meeting, the AAO BOT approved a business plan to develop an AAO access to care program based on the Donated Dental Services (DDS) program model offered by the National Foundation for the Dentally Handicapped (NFDH). AAO is working in partnership with the NFDH to launch pilot access to care programs in Illinois, Indiana, Kansas, New Jersey and Rhode Island and will provide up to \$50,000 in total start-up funding. AAO's access to care program will be branded as the AAO Donated Orthodontic Services (DOS) program. The AAO Access to Care Task Force will work in cooperation with the NFDH and the component societies in the respective pilot states to get the programs launched.

Cleft Palate and Craniofacial Anomalies

COHC continued to investigate areas of orthodontic need in the treatment and management of cleft palate and craniofacial anomalies. Dr. Robert MacLean contacted the American Cleft Palate Association and Craniofacial Foundation (ACPACF) directly for information about the organization and how the AAO might arrange to work in partnership. The council plans to host representatives from ACPACF to explore ways that the AAO and ACPACF might work together to address expanded cleft lip/palate care for these patients.

Future Meetings

The council will meet in St. Louis, MO on January 16, 2010.

GLAO Calendar of Events

2009

October 29 – November 1
GLAO Annual Session
 Sheraton Centre
 Toronto, ON, CANADA

2010

September 30 – October 3
GLAO/MASO
Joint Annual Session
 The Breakers
 Palm Beach, FL

2011

September 15 – 18
GLAO/MASO
Joint Annual Session
 Hilton Pittsburgh
 Pittsburgh, PA

2012

September 6 – 9
GLAO Annual Session
 Hyatt Indianapolis
 Indianapolis, IN

Council on Scientific Affairs

DR. NAN HATCH

Greetings to all the GLAO members. My name is Dr. Nan Hatch and I have recently been selected to be the new GLAO representative to the Council on Scientific Affairs. I will be replacing Dr. Michael Riolo, whose past contributions are greatly appreciated. I hope to continue his role encouraging and evaluating advances in orthodontic research. COSA held a meeting on May 1, 2009 in Boston, at which Dr. Bhavna Shroff (COSA chair) welcomed the two newest members, Dr. Frans Currier (SWSO) and myself.

This meeting was held to review COSA members' assignments for the 2009 Annual Session. During the 2009 Annual Session, COSA members judged 40 Charley Schultz Resident Scholar presentations and 39 Table Clinic presentations. COSA members also moderated the AAO Research Award lectures and the 26 Oral Research presentations. At the Annual Session 254 posterboards were displayed. COSA evaluated the posterboard application abstracts in November 2008.

Dr. David Turpin, *AJODO* Editor, recently finished a podcast and written brief regarding Invisalign. COSA members provided input on the podcast script and the brief during their development. The podcast and brief will be posted on the braces.org website.

COSA members are working on two summary statements for the *AJODO*. The first summary statement focuses on self ligating brackets and Dr. Steve Marshall (University of Iowa) is the primary author. The second summary statement is on white spot lesions and Dr. Sandra Guzman-Armstrong (University of Iowa) is the primary author.

COSA's most recent summary statement entitled "Is topical fluoride treatment (TFT) effective in preventing demineralization/white spot lesions

in orthodontic treatment?" was published in the May 2009 *AJODO*. Dr. Lokesh Suri (Tufts University) is the primary author of the summary statement.

COSA manages the Evidence Based Orthodontic Research website and the Bisphosphonate website found on the aaomembers.org website under the Library and Research tab. Usage statistics for the Evidence Based Orthodontic Research website and Bisphosphonate website for the period June 2008 – April 2009 and June 2007 – April 2008:

Visitors to Evidence Based Orthodontic Web Site	3846	3727	08-09	07-08
Evidence Based Orthodontic Journal Requests	375	309		
Visitors to Bisphosphonate Web Site	1215	1040		
Bisphosphonate Journal Requests	163	251		

Starting August 1, 2009 COSA will begin accepting online applications to present Oral Research, Table Clinics and Posterboards at the 2010 AAO Annual Session in Washington, DC. The online application will be posted on the aaomembers.org website. The application deadline is October 15, 2009. Applications are also being accepted for the Milo Hellman Research Award, the Harry Sicher Research Award and the Thomas M. Graber Award of Special Merit. Applications for these awards can be obtained from all program/department chairs of ADA and CDA accredited orthodontic programs. The application deadline is October 15, 2009.

COSA will meet next on January 8, 2010 via video conferencing and teleconferencing.

Council on Insurance

DR. JERRY R. HICKMAN

The AAO Council on Insurance has conducted two meetings this year. The first meeting in January, was attended by insurance company representatives, council members and our AAO Trustee; Dr John Buzzatto. At our second meeting in June, the Trustees were represented by Dr. Hugh Phillis.

According to the AAO bylaws, the duties of the Council on Insurance shall be to;

- Act on behalf of the association as a liaison between the association and its insurance carriers.
- Study, evaluate and make recommendations on the association endorsed insurance plans and programs.

At each meeting the Council reviews with the insurance carriers the individual AAO endorsed insurance programs. Do they meet the needs of our members? Are they financially stable? What can we do to make them better? How can we best communicate and market these products to our members?

Life, Disability & Medical

Highlighting the most recent meetings has been the review of the New York Insurance Master Policy. This policy covers the AAO Endorsed Term-Life, Long-Term Disability, Professional Overhead Expense and Major Medical coverage. The review is to ensure the policy is in compliance with the recent New York State's investigation into insurance companies. It will also help determine the appropriate reserving levels and administrative expenses charged to the plan.

At the June meeting the Council recommended that the Board of

Trustees (BOT) approve a 6% increase on all Major Medical Plans, effective October 1, 2008. There has not been a rate increase in the Major Medical Plan since April 1, 2007. Historically, due to continued inflationary costs in the medical industry, there is a need to continually increase the rates in the Major Medical Plans. The Council works very hard to minimize these increases yet maintain financial stability.

The AAO continues to promote Health Savings Accounts (HSA's) which can provide significant tax advantages to the members. Amounts contributed to an HSA belong to the insured and are completely portable. Every year the money that is not spent stays in the investment account and can gain interest tax deferred, just like an IRA. Unused amounts are available untaxed after age 65 if allocated for other health care costs or qualified medical expenses. Among its many benefits, the HSA puts the individual more in control of their health care expenses.

AAO Business Office Package and Employee Practices Liability Insurance

AAO Business Office Package (BOP) participation continued to increase this past year. St. Paul/Travelers offers very competitive rates across the country with a 10% discount for AAO members. If for some reason St. Paul/Travelers is not competitive in an area Aon/JLT will provide additional quotes and coverage with other carriers. The BOP can also include workman's compensation coverage and an umbrella endorsement.

Property coverage should include wind and flood damage if appropriate. Business Interruption Insurance provides coverage for loss of income if an event would close down the practice. Not all policies cover these endorsements. I continue to recommend each member review their BOP policy to update their coverage on a yearly basis at the time of renewal.

The AAO Council on Insurance is currently looking at other carriers for Employment Practice Liability Insurance (EPLI). Presently, the AAO endorses an EPLI policy underwritten by St. Paul/Travelers. This insurance protects against suits brought on by allegations of discrimination, harassment, wrongful termination, failure to promote and other practice related incidents. The AAO EPLI plan includes legal coverage with a variety of plan options depending on the size of the practice and has excellent risk management benefits. This type of liability exposure is not generally covered under other office policies and the exposure can be significant.

Professional Liability

The AAO endorsed Professional Liability Plan as of December 31, 2007, reached another milestone with over 4200 insured, representing well over 50% of the AAO membership. This represents a 7% growth increase and new business this past year.

AAOIC is currently marketing a unique opportunity for our members who do not have their professional liability coverage with AAOIC. As of July 1st, for a limited time only, a 25% rate discount is being offered to first time buyers with AAOIC (this does not apply to new graduates). It is time again to compare your current policy

with the AAO's because of the potential savings and to evaluate the many benefits offered having a liability policy overseen by your peers.

The COI continues to stress the need to educate our members on risk management. At the AAO annual session in Denver, a mock trial was held for the benefit of the members. Issues frequently seen in the claims handled by AAOIC were presented. Over 400 members attended allowing them to receive a 10% discount on their next year premium. Given the success of this program, similar programs at future AAO sessions will certainly be planned.

For information regarding any AAO endorsed programs go to our AAO member's only website, www.aaomembers.org or directly to www.aao-insurance.com. You may also contact the Endorse Insurance Office at (800)622-0344.

Thanks

**to the GLAO Delegates and Alternate Delegates
that represented the GLAO
at the 2009 AAO House of Delegates...**

Dr. Stephen J. Belli
Dr. Jeff Berger
Dr. Robert F. Good II
Dr. Ronald S. Good
Dr. Jerry Hickman
Dr. Richard M. Marcus
Dr. John F. Monticello
Dr. Gregory Oppenhuizen
Dr. W. Eugene Roberts
Dr. Michael W. Sherman
Dr. Christopher A. Roberts

The GLAO Board Recently Appointed the Following Individuals to Represent the Great Lakes Association of Orthodontists

Nan Hatch, DMD, PhD, Assistant Professor of Orthodontics and Pediatric Dentistry at the University of Michigan has been selected to represent the GLAO as the Council on Scientific Affairs (COSA) Representative to the AAO. The COSA representatives encourage and sponsor the advancement of orthodontic research; recommend such awards for achievement in the field of orthodontic research as established by the AAO; organize and maintain a research section at the AAO Annual Session.

Anthony M. Puntillo, DDS, MSD, of Chesterton, Indiana, will represent the GLAO on the newly appointed standing committee of the AAO Board of Trustees, formerly the AAO Council on Information Technology (COIT). The responsibilities of COIT included: researching new technologies that impact members; providing education to members on how these technologies might best be used; working with other AAO councils to enhance the dissemination of association information to and from its members, health-related entities, and the public. This newly appointed Committee on Orthodontic Information Technology will continue the efforts and activities of the COIT.

Thank you to these members for their interest in serving the GLAO in this capacity!



SCOTT A. JAMIESON, D.D.S., M.S.

New Director

During the 109th AAO Annual Session in Boston, the ABO welcomed Dr. Steven A. Dugoni of South San Francisco, CA, as the new director replacing Dr. John Grubb from the Pacific Coast Society of Orthodontics. He is in full time practice and is Adjunct Associate Clinical Professor at the University of the Pacific School of Dentistry. Dr. Dugoni serves on the Written Examination, Clinical Examination and Technology Committees. In addition, he is liaison to the ADA Standards Committee on Dental Informatics and is a CODA site visitor.

Dr. Steve Dugoni will be ABO President in May of 2016. Dr. Dugoni's father, Arthur A. Dugoni, was an ABO director from 1979-1986.

ABO Written Examination

The 2009 ABO Written Examination was conducted during the week of April 20-24 at Pearson-VUE Computer Centers across the United States and Canada. The results of the 2009 exam include 383 participants with 23 incompletes resulting in a 94% pass rate with a 6.19 criterion standard.

We are pleased to introduce Rhonda Legge as our new Written Examination Secretary.

Advocacy Program and CDABO

The ABO and College of Diplomates are currently working on an advocacy program that will encourage orthodontic residents to pursue ICE (Initial Certification Examination) and become Board Certified. In addition, the ABO has sent letters to all of the Chairpersons of Orthodontic Graduate Programs informing them that "The ABO fully endorses the College classes as the only preparatory route for certification and recertification exams."

Voluntary Recertification Examinations at College Meetings

The ABO, in partnership with the College of Diplomates, field-tested the examination of a voluntary recertification candidate at its recent meeting in Kohler, WI. The two examiners were members of the College who were calibrated as ABO examiners at the past ABO Clinical Examination. Two ABO Directors oversaw the examination. Examinees can register for Voluntary Recertification Examination to be graded at the 2010 College Meeting.

Director Selection

For the first time, an interview process was used for the selection of the new ABO Director in February 2009. Dr. Richard Diemer, ABO Educational Consultant, was closely involved in developing our interview questions. The process worked well and a new Director was selected to replace our out-going president. The constituency

chairperson of the Director Selection Committee was present for the interviews and was impressed with the professional manner in which the interviews were conducted.

The Albert H. Ketcham Memorial Award

The Board will honor Dr. James L. Vaden as recipient of the 2010 Albert H. Ketcham Award. This prestigious award is presented annually to an individual who, in the judgment of the ABO, has made a notable contribution to the science and art of orthodontics.

The Dale B. Wade Award

The Wade Awards honors an exemplary senior clinician who demonstrates exceptional dedication to orthodontics through clinical excellence and/or devoted teaching in the image of Dr. Wade. The 2010 Dale B. Wade Award of Excellence in Orthodontics will be given to Drs. Richard Kulbersh, W. Eugene Roberts and Peter A. Shapiro.

The Earl E. & Wilma S. Shepard Distinguished Service Award

This award recognizes an individual for outstanding dedication and advancement of the ideals and mission of the ABO. In 2010, Drs. P. Lionel Sadowsky and Bailey N. Jacobson will receive the Shepard Award.

Special Recognition Award

This award is given to individuals who have significantly contributed to orthodontic education and furthered the ideals of the ABO. In 2010, Dr. Alan J. Borislow will receive the Special Recognition Award.

2009-2010 Board of Directors

Dr. Peter M. Greco
President
MASO Director

Dr. Jeryl D. English
President-Elect
SWSO Director

Dr. Barry S. Briss
Secretary/Treasurer
NESO Director

Dr. Scott A. Jamieson
GLAO Director

Dr. Marvin C. (Buddy) Kastrop
RMSO Director

Dr. Paul T. Castelein
MSO Director

Dr. Eladio DeLeon, Jr.
SAO Director

Dr. Steven A. Dugoni
PCSO Director

Dr. John E. Grubb
Immediate Past President

THE AMERICAN BOARD OF ORTHODONTICS

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Fax: 314-432-8170
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www.americanboardortho.com



STEPHEN E. HERSHEY, D.D.S., M.S.

2009 Fundraising

William James once said “The greatest use of life is to spend it for something that will outlast it.”

To date, the fundraising effort, **Continued Commitment to the Specialty**, has realized a total of \$32.4 million in pledges, of which \$23.3 million has been redeemed.

At the recent meeting of the Foundation Board, the Directors made a number of decisions concerning a new fundraising strategic direction that will result ultimately in an expanded Awards Program, some of those highlights and accomplishments of which are as follows:

- **Goal of the Foundation Awards Program**
- AAOF Mission is “to advance the orthodontic specialty by supporting education and research.”
- Foundation funding designed to ensure the future viability of the specialty, by investing in the next generation of educators and researchers.

Support of this goal by the next generation of orthodontists was certainly in evidence at this year’s GORP meetings. Current residents made pledges totaling \$360,000, demonstrating their “Continued commitment to the specialty.”

Since 1994, the AAO Foundation Awards Program has provided \$6.6 million in funding, primarily in support of Junior Faculty, including:

- 125 Fellowship Awards
- 148 Research Awards
- Over 1,000 gifts in Support of Orthodontic Education

Support for Junior Faculty has resulted in:

- Publications – over 100 and abstracts, most of which have been published in journals within orthodontics, but many in journals outside the specialty and the profession.
- Lectures – scores of lectures at dental, orthodontic and at other scientific meetings as well.
- Professional advancement – to date at the 70 graduate orthodontic residency programs in the US and Canada there are:
 - 22 Department chairs and/or program directors funded with Junior Faculty
 - Dozens of tenured, associate and full professor positions
 - Eight NIH funding recipients
- 80% of Junior Faculty supported by the AAOF remain in full-time academics after five years.

On the AAOF web site, there are Final Reports from some 250 peer-reviewed, funded proposals.

At our meeting last weekend we were pleased to welcome Dr. John Buzzatto to the board of directors as an AAO Trustee representative. We will certainly benefit from John’s experience and the more GLAO representatives we have the better!

Please visit our web site and choose a pledge option that will allow you to fulfill your “Continued Commitment to the Specialty.”

If you should have any questions, please call Robert Hazel, AAOF EVP, at (800) 424-02841, ext. 546, or me, at your convenience.

COMPONENT UPDATES



Indiana Association of Orthodontists

DR. ARON E. DELLINGER

In Indiana we are proud to be included in a pilot program to offer Donated Dental Services through the AAO. This program will allow Orthodontists who wish to participate to treat program patients, and freedom to make their normal treatment decisions without restrictions. Participants will be asked to donate two cases per year to be accepted as providers. More information will be provided as the program specifics take shape. Indiana is one of only 5 test states included in this pilot.

The IAO annual CE program and membership meeting will be held in Indianapolis, IN on March 20th, 2010. The speaker is well known SSC presenter Maurice Salama. He is a combined Ortho-Perio specialist from Atlanta practicing in a unique interdisciplinary office. His topic is appropriately, "Interdisciplinary treatment planning." Registration and site details are to come soon!



Michigan Association of Orthodontists

DR. GREGORY OPPENHUIZEN

The Michigan Association of Orthodontists annual session was held this year at the Detroit Athletic Club in downtown Detroit. The annual meeting in Detroit featured Char Eash. Ms. Eash is CEO of Profit Marketing Systems South, Inc. an orthodontic systems specialist located in Tampa, Florida. However, many of us know Char when her home was Interlochen, Michigan. Char's energetic practice management presentation was directed to both orthodontists and also to orthodontic staff.

Dr. Lawrence Ashman, assistant professor at the University Of Michigan School Of Dentistry and the Director of the University of Michigan TMD and Orofacial Pain Clinic presented a lecture on TMJ pathology and pain management. Dr. Ashman's lecture fulfilled attendees State mandated licensure requirement for pain management. Since the state implemented the pain management requirement for licensure the MAO has consistently offered lectures to help member orthodontists accomplish this mandate.

At the annual business meeting, Mark Berkman became President of the Michigan Association of Orthodontists for 2009-2010. Dr. Berkman practices in Commerce Township. He also is currently a part-time faculty member in the Department of Orthodontics at the University of Michigan. Dr. Berkman lectures on embryology & craniofacial growth to both the dental students and also the

orthodontic residents. He is also a clinical instructor in the graduate orthodontic clinic.

At the last GLAO Annual session in Puerto Rico, our AAO Trustee, John Buzzatto, introduced the AAO Board of Trustee's proposed Affiliation Agreement between the AAO, GLAO, and the MAO. The purpose of the Affiliation Agreement is to codify the contractual relationship between the AAO and the various Constituent and Component Orthodontic Associations. After much discussion and a rewrite of the document, GLAO President, Richard Marcus, signed the agreement soon after the AAO annual session in Boston. Subsequent to the GLAO signing, President Mark Berkman signed the MAO Affiliation with the GLAO. The Affiliation Agreement codifies what has been the functional relationship between our orthodontic organizations to protect and benefit all our Associations.

This year Mike Riolo stepped down from his position as GLAO Representative to the Council on Scientific Affairs (COSA). Dr. Riolo was replaced by Dr. Nan Hatch from the University of Michigan. I would like to personally thank Mike for his years of dedicated service to our profession and in particular his service to the AAO, ABO, GLAO, and the MAO. I am confident that Dr. Hatch will continue on to serve the GLAO in the exemplary footsteps of Dr. Riolo.

Another transition is at hand as well, I have served in the position of Michigan Director to the GLAO for the last six years. The annual session in Toronto will be my last as Director. Dr. Jocie Weeden will assume the position of Michigan Director at the GLAO Ad Interim meeting in March 2010. Dr. Weeden has demonstrated her ability leading the MAO and I share the MAO Board's confidence that she will well represent the MAO at the GLAO Board.



Don't forget
your PASSPORTS
for the 2009
Annual Session!



Ontario Association of Orthodontists

DR. JEFF BERGER

Dr. Sheila Smith -
President

Dr. Graeme Hibberd
Vice-President

Dr. Julianne Peterson
Secretary - Treasurer

The following highlights were discussed at June OAO Executive meeting:

1. The RCDSO report outlined the following:
 - a. *Cone Beam/CT Scan* – Currently only oral radiologists have the authority to use a cone beam in their offices. Efforts are being made to lift this moratorium. A dentist desiring to use a cone beam will have to complete a course with minimum standards, not the same standards required for an oral radiologist.
 - b. *New Guidelines on Infection Control* – A DVD based educational program will be produced for the membership.
 - c. *Electronic Recordkeeping* – A report will be formulated and sent to the Quality Assurance Committee.
2. The OAO website will be revised and improved

3. CAO members are interested in having the CAO Board of Directors examine the credit card processing fees & changes in commission rates. They would then be in a position to represent the membership in discussions with the banks and credit card companies.
4. The general ODA council approved in principle as of 2011, that membership in the ODA will include all products and services that membership in the CDA provides.
5. The OAO would like to extend a very warm welcome to all GLAO members and their staff who plan to attend the annual session in Toronto from October 29 to November 1.



Ohio Association of Orthodontists

DR. DENNY JOHNSON,
OAO PRESIDENT

The Ohio Association of Orthodontists will again hold our annual meeting in conjunction with the Ohio Dental Association in Columbus on Friday August 28th featuring Dr. Ron Roncone as the guest speaker. The OAO business meeting will occur during the luncheon hour. The morning and afternoon sessions as well as the luncheon will be Ohio State Dental Board credit hours.

This year will be a pivotal year for the OAO as we are aligning our by-laws to correlate with the proposed constituent/component agreement to

be signed with AAO/GLAO and Ohio. Further we will introduce our new Board of Directors and officers at the meeting.

OAO is busy working on obtaining professional management for our day to day needs and most importantly allow our group resources to focus on meeting the needs of the orthodontists in Ohio. It is time that we take steps to align our future so that we will be achieving our role in delivering health care.



Pennsylvania Association of Orthodontists

DR. J. RICHARD PFEFFER

The annual meeting of the Pennsylvania Association of Orthodontists was held in Jupiter, Florida on April 2nd -4th. President Matt Stacy held a wonderful meeting and despite the out-of-state venue, it was very well attended. Subjects ranged from temporary anchorage devices to the clinical benefits of self-ligation. Unitek, who helped fund the meeting, also made a presentation on the new iBraces System and those in attendance were deemed certified in this new lingual bracket system. It was a wonderful meeting with a nice mix of Continuing Education and social events. An afternoon fishing excursion proved to be enjoyable although Dr. Buzzatto failed to catch a fish again.

Our new president, Dr Richard Ribarevski, will hold his annual meeting. The speaker is yet to be announced.

No pressing business in the state legislature as they continue to wrangle over a much-delayed budget. The PAO continues to be a healthy, vibrant organization with a membership of 138.

DR. DAVID G. HAAS

As we know very well, the greatness and dynamism of an organization rests on both the leaders as well as the total membership of our group. I know the present-day leadership acknowledges the contributions and efforts of those who preceded, many of whom are no longer with us.

As Historian and a 40-plus year member of the Great Lakes, I certainly am aware that we owe our gratitude to these past members, too numerous to mention. We should also be cognizant of the fact that spouses and other non-members are a part of the vitality. The

spirit and social interaction may have depended more on the spouse than the member himself. I intentionally used the male gender since we were the overwhelming majority in the past.

Many of the survivors of past members were suddenly cut off from friends of longstanding. Sure there was always the telephone, but you know that is not the same as having a commonality of purpose and place. Several women have personally lamented this fact and the Great Lakes Board is extending an invitation to all spouses of deceased members who might be interested to attend our annual fall meeting.

This year of course we are in Toronto which has always been a great venue

and is quite accessible. There will be no registration fee and special activities will be planned depending on numbers that sign up and their wishes.

The problem of course is how to reach interested parties since most do not receive this publication. I am requesting your help to spread the word to someone that might wish to renew old acquaintances. Time will be short due to the schedule of the newsletter publication. You may contact me (330-666-6541 or haasd@msn.com) or the GLAO central office (877-274-6420 or GLAO@assnoffices.com) for details. Thanks so much for your help.

Attention Members:

If you know a spouse of a deceased GLAO member who would be interested in receiving GLAO newsletters and Annual Session invitations, please contact the GLAO office and provide their mailing address and email address. The GLAO recognizes that these individuals have become part of the GLAO family and may wish to continue to receive communications. GLAO spouses of deceased members are invited to attend the GLAO Annual Session with complimentary meeting registration. You may email this information to GLAO@AssnOffices.com or call 877-274-6420.

Michigan Doctor Turns to AAOIC for Peace of Mind

AS CITED IN FEBRUARY 2009 ISSUE OF THE BULLETIN

A recent experience with a commercial insurance carrier led Dr. Michael Riolo of Grand Haven, MI to switch his coverage to the AAO Insurance Company.

The problem arose with having a single commercial carrier provide both his malpractice insurance and business insurance. For over 15 years with this carrier, he had no claims.

But when a water pipe leak damaged the office two years ago, he filed a property claim. At this point the commercial carrier threatened to cancel the business insurance which also would cancel the malpractice since the two policies were linked. This is even though he had a clean malpractice record, he said.

"Until then, I didn't realize that if they canceled the business insurance, they would also cancel the malpractice," Dr. Riolo said. He cautions others to



Dr. Michael Riolo, right, and his wife, Dr. Michelle Thornberg-Riolo, with who he practices.

be watchful for such clauses in their commercial policies.

Following this experience, Dr. Riolo enrolled with the AAOIC for his malpractice coverage. He now has peace of mind.

"I know even if there is a problem, the AAOIC will take care of us," he said. "They are going to be our advocate and defend us."

PRESIDENT'S REPORT

CONTINUED FROM PAGE 2

This has been a very busy year for the GLAO. Probably the most significant matter which the GLAO has dealt with over the past year has been the new affiliation agreements between the AAO and the GLAO, and the GLAO and its Component Societies. The Agreements are essential to structure existing working arrangements amongst the different groups. For the GLAO, no new By-Laws or Policies were required in order to sign the Agreement. Our Components will hopefully sign before we meet in Toronto. Some of the Components will be required to Incorporate, and possibly also establish or modify their By-Laws. Once all the Agreements are in place, we will have formalized what has, in the past, been an ad hoc relationship.

For the first time in many years, your GLAO Delegation was able to have two motions accepted by the AAO House of Delegates. One motion related to preventing the mention of specific fees in the AAO Public Awareness Campaign; the other motion related to encouraging the AAO to explore means of helping our Orthodontic Residents, many of whom are having financial difficulties in these challenging times.

Equally challenging during these times is the need for appropriate guidance of the GLAO Investment Committee. The composition of the Committee has been broadened to include several members whose financial expertise has ensured proper stewardship of GLAO resources.

It has been a very rewarding experience for me to have been your President over the past year. I want to take the opportunity to thank all the members of the GLAO Board and all our members who have been so supportive. Our Association is fortunate to be in such very good hands. As well, I wanted to thank those whose efforts often go unheralded — our Executive Director, Debbie Nunner, and Executive Assistant, Ashley Menefee.

I look forward to seeing many of you in Toronto!

MEMBERS IN THE NEWS

Dr. Walter Buchsieb was named Honorary Chairman of the Summer 2009 Meeting of the College of Diplomates of the American Board of Orthodontics, held in Kohler, Wisconsin.

On May 1st, **Dr. Walter Buchsieb** was named Dental Alumnus of the year 2009 by the Alumni Association of the College of Dentistry at The Ohio State University.

Dr. Katherine W.L. Vig received the 2009 ABO Albert H. Ketcham Memorial Award.

The Albert H. Ketcham Memorial Award is awarded annually to an orthodontist(s) or some other person, who in the judgment of the award committee has made a notable contribution to the science and art of orthodontics.

The GLAO would like to recognize and congratulate **Dr. James McNamara Jr.**, who has been reappointed to the Thomas M. and Doris Graber Endowed Professor of Dentistry, School of Dentistry, University of Michigan. Effective September 1, 2009 to August 31, 2014.

Our members continue to receive national and international recognition for excellence. If you are a “member in the news” or if you know of a member recently recognized, please send this information to the GLAO office at GLAO@AssnOffices.com so that we can publicize your success!

Congratulations to these outstanding professionals for their accomplishments!



Directors

INDIANA

Dr. Aron E. Dellinger
1120 E. Dupont Road
Fort Wayne, IN 46825

MICHIGAN

Dr. Gregory Oppenhuizen
205 W. 29th Street
Holland, MI 49423

ONTARIO

Dr. Jeff Berger
600 Tecumseh Road E #241
Windsor, ON N8X 4X9
CANADA

OHIO

Dr. Phillip J. Beckwith
829 Eastwind Drive
Westerville, OH 43081

WESTERN PENNSYLVANIA

Dr. J. Richard Pfeffer
508 Logan Blvd.
Altoona, PA 16602

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GLAO
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Columbus, Ohio 43215
www.GLAO.org

GLAO Membership

	August 2009
Active	732
Affiliate	4
Academic/ Foreign Trained	2
Honorary	1
Life	141
Retired	211
Total	1092

AAO Council Representatives

Council on Communications	Dr. Robert F. Good, II
Council on Governmental Affairs	Dr. M. Donald Hayes
Council on Insurance	Dr. Jerry Hickman
Council on Membership, Ethics, and Judicial Concerns	Dr. Richard M. Marcus
Council on Orthodontic Education	Dr. W. Eugene Roberts
Council on Orthodontic Health Care	Dr. Robert J. Brown
Council on Orthodontic Practice	Dr. Mary K. Barkley
Council on Scientific Affairs	Dr. Nan Hatch
Council on New and Younger Members	Dr. Scott O. Schulz

GLAO 2009 – 2010 Ballot Results

PRESIDENT

Dr. Ronald S. Good

PRESIDENT-ELECT

Dr. Robert F. Good, II

VICE PRESIDENT

Dr. Jerry Hickman

SECRETARY-TREASURER

Dr. Michael W. Sherman

DELEGATES

Dr. Jeff Berger
Dr. Robert F. Good, II
Dr. Ronald S. Good
Dr. Jerry Hickman
Dr. John F. Monticello
Dr. Christopher A. Roberts
Dr. W. Eugene Roberts

ALTERNATE DELEGATES

Dr. Aron Dellinger
Dr. Dale Anne Featheringham
Dr. Richard M. Marcus
Dr. Michael W. Sherman



New

Active Members

Below are the New GLAO members since May 2009:

Michael Agenter
Fatima Ahmed
Scott M. Behnan
Brett Brown
Jason Lee Charnley
Susan Friedman
David Havens
Angela Kay Incrapera
Gerald F. Johnson
Cynthia C. Leung
Scott MacGregor
Luis Piedade
Brittany Potts
Wanvadee Shewinvanakitkul
Jeffrey M. Shirck
Jennifer Smith
Timothy Stuhlmiller
Ariadna Torres-Gorena
Samuel Paul Wise
Jared Zwick

Recently Retired Members

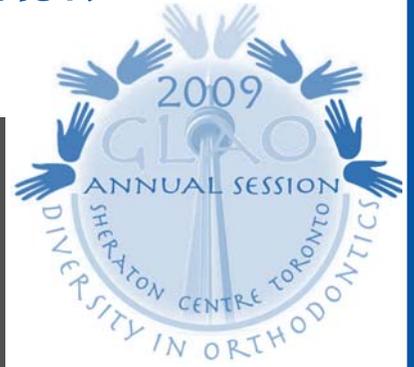
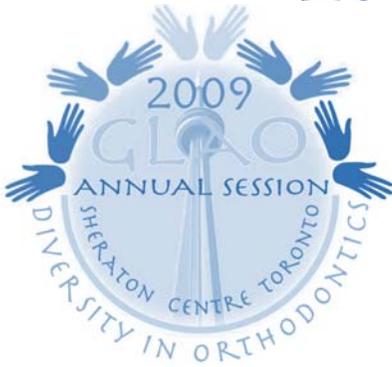
Gary G. Hickman
Michael L. Riolo

Recently Deceased Members

Lyn V. Bates
Jerome H. Giblon
Wayne F. Hootman

2009 GLAO Annual Session

CONFIRMED SPEAKERS



R. BAUER



R. BOYD



J. COPE



C. FRIEDMAN



T. FROHLICHSTEIN



P. GANGE



T. MULLIGAN



R. NANDA



G. SAMSON

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*The Toronto Orthodontic Club
and the
University of Toronto
Orthodontic Alumni Association*

Register on-line at www.GLAO.org



2009 GLAO Annual Session

PROGRAM-AT-A-GLANCE



Thursday – October 29

8:00 am - 2:00 pm GLAO Board Meeting

12:00 pm - 6:00 pm Registration Open

6:30 pm - 7:30 pm Welcome Reception

Complimentary - registration requested

CO-SPONSORED BY ONTARIO ASSOCIATION OF ORTHODONTISTS

Friday – October 30

7:30 am - 8:30 am Continental Breakfast in Exhibit Hall

7:30 am - 4:00 pm Registration Open / Exhibits Open

8:30 am - 10:00 am DOCTOR SESSION:

THE DONALD G. WOODSIDE ALUMNI LECTURE

Dr. Gerry Samson/Dr. Tom Mulligan

“The Tom & Gerry Show’: Simplified Clinical Mechanics for Stubborn Orthodontic Problems”

CO-SPONSORED BY 3M UNITEK

8:30 am - 10:15 am STAFF SESSION

Rita Bauer: “Capture the Perfect Smile and Prepare Effective Marketing and Educational Material for Your Practice”

SPONSORED BY PRACTICEWORKS / ORTHOTRAC

10:00 am - 10:45 am Beverage Breaks in Exhibit Hall

10:30 am - 12:00 pm DOCTOR SESSION:

THE DONALD G. WOODSIDE ALUMNI LECTURE

Dr. Gerry Samson/Dr. Tom Mulligan

(continued)

CO-SPONSORED BY 3M UNITEK

10:45 am - 12:00 pm STAFF SESSION

Rita Bauer (continued)

SPONSORED BY PRACTICEWORKS / ORTHOTRAC

12:00 pm - 1:30 pm Complimentary Box Lunch in Exhibit Hall

12:00 pm - 1:30 pm ABO / CDABO Luncheon

Complimentary - registration requested

12:00 pm - 1:30 pm Ontario Association of Orthodontists, Fall General Meeting & Luncheon

Registration required through the OAO office

1:30 pm - 3:00 pm DOCTOR SESSION

Dr. Ravi Nanda: “Achieving Esthetic Goals with Targeted Biomechanics, Self Ligating Brackets and ‘Smart Wires’”

SPONSORED BY CERUM ORTHO ORGANIZERS

1:30 pm - 2:45 pm STAFF SESSION

Dr. Gerry Samson:

“The Exceptional Employee”

CO-SPONSORED BY 3M UNITEK

2:45 pm - 3:30 pm Beverage Breaks in Exhibit Hall

3:30 pm - 4:30 pm DOCTOR SESSION

Dr. Ravi Nanda (continued)

SPONSORED BY CERUM ORTHO ORGANIZERS

3:30 pm - 4:30 pm STAFF SESSION

Dr. Gerry Samson (continued)

CO-SPONSORED BY 3M UNITEK

6:00 pm - 10:00 pm Hockey Hall of Fame Event

Registration required

Saturday – October 31

7:15 am - 8:15 am GLAO Business Meeting with

Breakfast Buffet **Complimentary - registration requested**

7:30 am - 8:30 am Continental Breakfast in Exhibit Hall

7:30 am - 4:00 pm Registration Open

7:30 am - 5:30 pm Exhibits Open

8:30 am - 10:00 am DOCTOR & STAFF SESSION

Tripp Frohlichstein:

“Creating a Healthy, Beautiful Message”

SPONSORED BY AMERICAN ORTHODONTICS

10:00 am - 10:30 am Beverage Breaks in Exhibit Hall

10:30 am - 12:00 pm DOCTOR & STAFF SESSION

Tripp Frohlichstein (continued)

SPONSORED BY AMERICAN ORTHODONTICS

12:00 pm - 1:30 pm Complimentary Box Lunch in Exhibit Hall

12:00 pm - 1:30 pm COE Luncheon - **invitation only**

12:00 pm - 1:30 pm GLAO Past President’s Luncheon **invitation only**

1:30 pm - 3:00 pm DOCTOR SESSION

Dr. Jason Cope:

“Just A TAD Better Interdisciplinary Treatment: Using TADs to Place Teeth Where Your Restorative Colleague Really Wants Them”

CO-SPONSORED BY 3M UNITEK

1:30 pm - 2:45 pm STAFF SESSION

Carolyn Friedman:

“How to Overcome the Effects of the Economy on Orthodontics; Fewer Patients Mean We Have to Work Smarter...How?”

SPONSORED BY GAC INTERNATIONAL

2:45 pm - 3:30 pm Beverage Breaks in Exhibit Hall

3:30 pm - 4:30 pm DOCTOR SESSION

Dr. Jason Cope (continued)

CO-SPONSORED BY 3M UNITEK

3:15 pm - 4:30 pm STAFF SESSION

Carolyn Friedman (continued)

SPONSORED BY GAC INTERNATIONAL

4:30 pm - 5:30 pm Wine & Cheese Reception in Exhibit Hall

Complimentary - registration requested

5:00 pm Raffle Prize Drawing

You must be present to win!

Sunday – November 1

7:30 am - 8:30 am Continental Breakfast

8:00 am - 10:00 am Registration Open

8:30 am - 9:30 am DOCTOR & STAFF SESSION

Paul Gange:

“Orthodontic Materials & Clinical Bonding Situations”
THE SPEAKER HAS DONATED HIS HONORARIUM TO THE PRESENTING ORGANIZATIONS.

9:30 am - 10:00 am Beverage Break

10:00 am - 12:00 pm DOCTOR & STAFF SESSION

Dr. Robert Boyd:

“Improving the Predictability of Quality Treatment with Clear Aligner Therapy”



The **Sheraton Centre Toronto**, centrally located in the heart of Toronto, will be the site for what is sure to be an outstanding program. All attendees are encouraged to stay at the host hotel, the Sheraton Centre Toronto!

2009 GLAO Annual Session EXHIBITOR LIST

As of 8/20/09

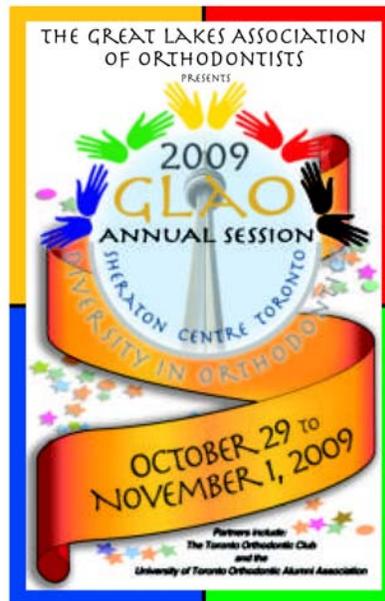
3M Unitek	Oasys Practice, LLC
Align Technology	Opal Orthodontics
American Orthodontics	Ormco
AOA	Ortho Classic
Aurette	Ortho Club
Azure Ortho	Ortho2
Benco Dental	OrthoBanc
Cerum Ortho Organizers	Orthobyte
Crest/Oral-B	OrthoCAD
Dental Marketers	Orthopli Corp
Dentaurum	Planmeca
Dexta Corporation	PracticeWorks/OrthoTrac
Dolphin Imaging & Management Solutions	Reliance Orthodontic Products, Inc.
Elsevier Canada	RMO, Inc.
Forestadent	Solutions by Design
GAC International	SPEED System
Great Lakes Orthodontics	Summit Orthodontic Services, Inc.
Henry Schein Canada	Sure Smile
iStore Canada	TeleVox
Kidzpace Interactive Inc.	topsSoftware
LB Microimplant	Treloar & Heisel

Checklist for the 2009 Annual Session

Meeting Registration: Submit your online registration and payment by **September 29** to receive the discounted rate! Confirmation will come to you via e-mail. Your name badge can be picked up at the meeting registration desk and must be worn for entrance to all events.

MEETING REGISTRATION INCLUDES:
Admission to doctor and staff sessions on Friday, Saturday and Sunday; Exhibit Hall admission on Friday & Saturday; Continental Breakfasts on Friday, Saturday & Sunday; Box Lunches on Friday and Saturday; Beverage Breaks on Friday, Saturday & Sunday; Thursday evening Welcome Reception (Co-Sponsored by the Ontario Association of Orthodontists); Wine & Cheese Reception in Exhibit Hall on Saturday. Please note: All registration and event fees are quoted in US dollars.

Hotel Reservations: Make your hotel reservations by **September 28th** to receive the GLAO group rate! The **Sheraton Centre Toronto Hotel** will be the host hotel for the GLAO Annual Session. To make your hotel reservations at the Sheraton Centre Toronto, visit the GLAO website at



www.GLAO.org where you can link to the online reservations or call 1-888-627-7175 and ask for the "**GLAO block**" to receive the special group rates. **Please note:** If making your reservation online, you must go through the link provided on the GLAO website to receive the group rate. The GLAO encourages all meeting attendees to support the meeting and stay at the host hotel, the *Sheraton Centre Toronto*!

Travel: Make your travel arrangements! Toronto Pearson International Airport (YYZ) is located 22 Km / 15 Miles west of downtown Toronto, approximately 30 minutes from the Sheraton Centre Toronto. An Airport Express Shuttle Bus (operated by Pacific Western) provides a 24-hour shuttle service between the airport and the Sheraton (and three other hotels), seven days a week. If driving, The Sheraton Centre Toronto is located at 123 Queen Street West, Toronto, Ontario, M5H 2M9.

Passport: A U.S. passport IS required for U.S. residents traveling in/out of Canada.

Questions?? Call the GLAO office at 877-274-6420.



The Great Lakes Association of Orthodontists
17 South High Street, Suite 200
Columbus, OH 43215-3458

BE SURE TO MARK YOUR CALENDARS!

September 30 – October 3, 2010



GLAO/MASO Annual Session
The Breakers
Palm Beach, Florida

September 15 – 18, 2011



GLAO/MASO Annual Session
Hilton Pittsburgh
Pittsburgh, Pennsylvania