



AMERICAN ACADEMY™
OF OPHTHALMOLOGY

Protecting Sight. Empowering Lives.™

Managing a practice is complex.

The American Academy
of Ophthalmic Executives
can help.

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AMERICAN ACADEMY™
OF OPHTHALMOLOGY



Your Best Source for Practice Management Solutions



“AAOE provides valuable guides and insights on the practice of ophthalmology. I strongly encourage any ophthalmologist with an office-based practice to join.”

— BRADLEY SANDLER, MD
AAOE MEMBER SINCE 2005

“AAOE membership gives me great networking and learning opportunities. The listservs provide answers for everything.”

— SUE LOEN, OCS
PRACTICE ADMINISTRATOR
AAOE MEMBER SINCE 2008

The **American Academy of Ophthalmic Executives (AAOE)**, the practice management division of the American Academy of Ophthalmology, provides the solutions and the network to help you manage your practice more effectively. Join AAOE to ensure your practice succeeds in all aspects of business, coding, compliance and operations:

- **Coding ICD-10-CM accurately**
- **Keeping up to date on coding changes**
- **Audit-proofing your documentation**
- **Complying with the latest federal regulatory mandates**
- **Reducing patient wait times**
- **Hiring and keeping qualified personnel**
- **Improving patient and staff satisfaction**

As a member, you'll have access to these valuable members-only benefits:

Free registration and priority housing to ophthalmology's premier conference

Extensive, accurate and authoritative information

Listservs to connect with peers

Customized coding answers from AAOE's coding experts

Practice Management Express, a weekly email with news and advice

Weekly news briefs from the American Academy of Ophthalmology

Free subscription to *EyeNet Magazine* published monthly

Member discounts on events, products and other services

AcadeMetrics™ Benchmarking and Salary Surveys

Join AAOE or enroll your staff at
www.aao.org/joinaaoe



AAOE Membership Application for Administrative Personnel

AAOE MEMBERSHIP ELIGIBILITY

Individuals must be either (1) administrative personnel (which shall not include optometrists) employed by a member of the American Academy of Ophthalmology or (2) must themselves be a member of the Academy.

GENERAL INFORMATION

Last Name	First Name	Middle Initial	
Credential(s): (Check all that apply) <input type="radio"/> PhD <input type="radio"/> MBA <input type="radio"/> OCS <input type="radio"/> COA <input type="radio"/> COE <input type="radio"/> COMT <input type="radio"/> OT <input type="radio"/> CPC			
Job Title			
Practice Name			
Practice Address			
City	State	Zip	Country
Telephone	Fax		
Primary Email - Will be used to log in and retrieve passwords. Cannot match any other user's primary email. (Required)			
Communication Email - Academy communications will go to Primary Email unless this field is completed. (Optional)			

EMPLOYER INFORMATION

Physician Name	Academy Member #
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PAYMENT \$260 - Membership is from Jan. 1 to Dec. 31, 2016

☐ VISA ☐ MasterCard ☐ AMEX ☐ Discover ☐ Check or money order, payable to AAO

Card Number	Exp. Date	Authorized Signature	
Name on Card			
Cardholder's Billing Address			
City	State	Zip	Country

I understand and agree that the American Academy of Ophthalmic Executives does not accept optometrists or commercial representatives as members and that I must be a member of the American Academy of Ophthalmology. I further agree that if I violate the foregoing statement, my membership in AAOE will be terminated immediately and no membership or other fees will be returned.

Signature	Date
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RETURN THIS FORM TO: American Academy of Ophthalmology
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