

STATE AFFAIRS
Star Award 2010



STATE AFFAIRS
Star Award 2009



STATE AFFAIRS
Star Award 2008



STATE AFFAIRS
Star Award 2007



STATE AFFAIRS
Star Award 2006



STATE AFFAIRS
Star Award 2005



STATE AFFAIRS
Star Award 2004



STATE AFFAIRS
Star Award 2003



STATE AFFAIRS
Star Award 2002



STATE AFFAIRS
Star Award 2001



STATE AFFAIRS Star Award

COMPENDIUM

STATE AFFAIRS
Star Award 2011



STATE AFFAIRS STAR AWARD

The State Affairs Star Awards program, developed by the Secretariat for State Affairs and launched in 2001, provides special recognition to state ophthalmology societies for outstanding efforts on programs or projects they have implemented in the previous year. State ophthalmology societies may apply for these awards by responding to the Secretariat for State Affairs' annual organizational survey of state societies.

The Secretariat reviews all applications to determine which societies should receive the Star Award. This review takes into account the size of the society and overall effort and outcome of the project, with the objective of not disadvantaging smaller societies in favor of larger societies. The Secretariat has also established that there will be no minimum or maximum number of honorees in any year.

The Secretariat congratulates each Star Award-winning society for their efforts in creating and implementing these programs on behalf of their members and award recipients are recognized at the Secretariat-sponsored *Society Presidents Breakfast and Recognition Awards*, held in conjunction with the Academy's Annual Meeting.

State Affairs Star Award – Recipient History

2001 State Affairs Star Awards:

Membership Recruitment and Retention Programs

- ◆ Alabama Academy of Ophthalmology
- ◆ Massachusetts Society of Eye Physicians and Surgeons
- ◆ Virginia Society of Ophthalmology

Public Service/Public Information Programs

- ◆ New Mexico Academy of Ophthalmology
- ◆ Ohio Ophthalmological Society
- ◆ Pennsylvania Academy of Ophthalmology

Programs Benefiting Ophthalmologists in Training and/or New to Practice Ophthalmologists

- ◆ Minnesota Academy of Ophthalmology
- ◆ New Jersey Academy of Ophthalmology
- ◆ Oklahoma Academy of Ophthalmology

2002 State Affairs Star Awards:

Public Service/Public Information Programs

- ◆ Michigan Society of Eye Physicians and Surgeons

Programs for Ophthalmologists in Training and/or New to Practice Ophthalmologists

- ◆ Arkansas Ophthalmological Society
- ◆ Tennessee Academy of Ophthalmology

Member Web Site or Web site feature

- ◆ Maine Society of Eye Physicians and Surgeons
- ◆ Ohio Ophthalmological Society

Programs for Office Administrators or Ophthalmic Technicians

- ◆ Massachusetts Society of Eye Physicians and Surgeons

2003 State Affairs Star Awards:

Public Service/Public Information Programs

- ♦ South Carolina Society of Ophthalmology

**Programs for Ophthalmologists in Training and/or
New to Practice Ophthalmologists**

- ♦ Michigan Society of Eye Physicians and Surgeons

Programs for Office Administrators or Ophthalmic Technicians

- ♦ Ohio Ophthalmological Society

Educational Meeting for Members

- ♦ Maine Society of Eye Physicians and Surgeons
- ♦ New York State Ophthalmological Society
- ♦ Washington Academy of Eye Physicians and Surgeons

2004 State Affairs Star Awards:

Alabama Academy of Ophthalmology
EyeCare Alabama

Massachusetts Society of Eye Physicians and Surgeons
Shaken Baby Syndrome and Child Abuse Prevention Initiative

North Carolina Society of Eye Physicians and Surgeons
Southeast Regional Ophthalmology Residents/Fellows Meeting

Pennsylvania Academy of Ophthalmology
FOCUS – Pennsylvania's Ophthalmology News

2005 State Affairs Star Awards:

Arkansas Ophthalmological Society
Sight Savers Program

Connecticut Society of Eye Physicians
Health Plan Relations Project

Massachusetts Society of Eye Physicians and Surgeons
Pre-School Vision Screening Initiative and Implementation

New Jersey Academy of Ophthalmology
NJAO On The Road

Washington Academy of Eye Physicians and Surgeons
Increase WAEPS PAC Contributions

2006 State Affairs Star Awards:

Indiana Academy of Ophthalmology
PAC Newsletter

Maryland Society of Eye Physicians and Surgeons
The Eye Site: A Traveling Exhibit

Texas Ophthalmological Association
PatientsFIRST Coalition

2007 State Affairs Star Awards:

Connecticut Society of Eye Physicians
Medical Liability Reporting for Optometrists

Minnesota Academy of Ophthalmology
MAO Stop Optometric Surgery Fund

Ohio Ophthalmological Society
Technician Training School

Washington DC Metropolitan Ophthalmological Society
Membership Drive

2008 State Affairs Star Awards:

**Massachusetts Society of Eye Physicians and Surgeons
*Ophthalmic Assistant Training Program***

**Pennsylvania Academy of Ophthalmology
*Current Concepts in Ophthalmology***

**Virginia Society of Ophthalmology
*Legislative & Regulatory Affairs Projects***

2009 State Affairs Star Awards:

**Georgia Society of Ophthalmology
*Winter Clinical Symposium***

**Indiana Academy of Ophthalmology &
Kentucky Academy of Eye Physicians and Surgeons
*Annual Report and Member Benefit Tracking***

**Pennsylvania Academy of Ophthalmology
*Grassroots Advocacy Campaign***

2010 State Affairs Star Awards:

**Arkansas Ophthalmological Society
*Campaign to Educate Legislators about
Vision Screening and Comprehensive Eye Exams***

**Iowa Academy of Ophthalmology
*Sight for Soldiers***

**New York State Ophthalmological Society
*New York Coalition of Specialty Care Physicians***

2011 State Affairs Star Awards:

Connecticut Society of Eye Physicians
Medicine United: Special Forces

Florida Society of Ophthalmology
Informed Consent for Cataract Surgery

Ohio Ophthalmological Society
Play Hard. Don't Blink. Prescription Goggle Program

2001 STATE AFFAIRS STAR AWARDS



Membership Recruitment and Retention

Alabama Academy of Ophthalmology conducted a program designed to reestablish trust of current and former members of the society, to increase involvement of current members and encourage former members to rejoin the society. The society sought to address past failings of the organization, listening to concerns about past actions of the organization, and discussing the new direction the society would take. The society made a public commitment to fiscal responsibility and promoted an “open checkbook” policy with its members. Board members contacted Eye M.D.s in their districts to discuss and promote the societies activities, to solicit input and feed-back.

Massachusetts Society of Eye Physicians and Surgeons developed an *Eye M.D. Referral Directory* which served a number of purposes: it is their member directory and was distributed to all members; it is a reference for legislators, and was distributed to all Massachusetts legislators; it is a membership marketing tool, and was distributed along with a personal letter and membership application to all non-member Eye M.D.s along with a note that read: “81% of the most eminent ophthalmologists in the Commonwealth invite you to join them and have your name printed alongside theirs in the next membership directory...”; and, lastly, it was a physician referral directory and is made available on a limited basis to members of the public (budget limitations prevented broad distribution to the public). \$3,000 of the \$5,000 cost of the directory was paid for by advertising revenue.

Virginia Society of Ophthalmology engaged in a multifaceted effort to increase membership and improve member retention through its *Member-Get-A-Member* program. This effort involved making personal contact with members and non-members, increasing communication with members by expanding the newsletter and increasing mail, broadcast fax, and email contact, instituting a member benefits program (incl., e.g., coding advice; banking services) and promoting those benefits to members and non-members, and providing member discounts for coding seminar and annual meeting.

Pubic Service/Public Information

New Mexico Academy Ophthalmology's *New Mexico Eye Care Project* provides low cost (\$10.00) eye examinations for low-income patients. Over 50% of NMAO members participate in the program and over 300 patients were evaluated in 2000. Participating optical shops also dispense eyeglasses to needy individuals at a significant discount. These services fill a vital need in New Mexico, as the state has the 48th lowest per capita income and 24% of New Mexicans lack health insurance coverage.

Ohio Ophthalmological Society's *Play Hard. Don't Blink Program* sought to educate parents, children, and team coaches on sports eye safety. The program was jointly funded by the Ohio Department of Health Save Our Sight Fund. The program included a statewide public service effort to provide protective eyewear designed to reduce eye and facial injuries. The program received media coverage from multiple outlets, including print, radio and television. Members got involved by displaying posters and distributing brochures at their offices, speaking at community events, and being media spokespersons. The society worked with a variety of community sports organizations representing a variety of sports, health organizations, professional sports organizations, as well as sports equipment retailers and manufacturers.

Pennsylvania Academy of Ophthalmology continues to publish its *Current Concepts in Ophthalmology*. This publication, which may be described as a journal, is approximately 100 pages long, is printed in color with numerous illustrations and photos, and provides articles on a variety of clinical topics of interest to both Eye M.D.s and other physicians. These articles include for example, *Sports Related Orbital and Periorbital Injuries*, *Eye Disorders in Pregnancy*, *Nutritional Supplementation for Age-Related Maculopathy*, along with an article on the Pennsylvania Association for the Blind. The publication also included the 2000 Membership Directory of the PAO. *Current Concepts in Ophthalmology* was distributed to over 13,000 physicians and to all Pennsylvania legislators.

Programs for Residents or New-to-Practice Ophthalmologists

Minnesota Academy of Ophthalmology's *YOS@MAO Annual Serious Meeting* designed for residents and ophthalmologists in their first five years of practice to provide information that they do not receive in medical school or residency, and to provide a tangible benefit of membership in the MAO. This meeting provided information on E/M codes, contracts, reading balance sheets, and financial planning, all focusing on the ophthalmologist either entering practice or new to practice. Also used this meeting as an opportunity to promote involvement in leadership of the society. Cost of this meeting was covered by corporate support.

New Jersey Academy of Ophthalmology provides automatic membership for residents and discounts dues for Eye M.D.s in their first year of practice. They also cosponsored a Resident's Advocacy Program, for which they assembled a "faculty" that included Eye M.D.s, legislators, and the society's lobbyist and executive director one year and members of the regulatory arena, such as the president of the Board of Medicine, the next year. The legislators stressed the importance of personal relationships as an opportunity for exchange of information. The regulators gave the residents a sense that they could effectively participate in the regulatory process. Residents also learned about state and federal regulatory issues and agencies, as well as state and federal legislative issues that will impact their practices.

Oklahoma Academy of Ophthalmology conducted a *Residents Project* that included a Residents' Advocacy Program at which physicians and a legislator addressed residents, discounted dues for residents and Eye M.D.s in their first and second years of practice, and discounted the fee for a coding seminar. Advocacy training and coding seminars are vitally important because they impart information that residents want and need, but that is not part of a graduate medical education program. By providing this information via their *Residents Project*, the OAO not only met an important need but also demonstrated to residents how important it is to be a member of a state society.

2002 STATE AFFAIRS STAR AWARDS

STATE AFFAIRS
Star Award 2002

 AMERICAN ACADEMY
OF OPHTHALMOLOGY
The Eye M.D. Association

Public Information/Public Service:

Michigan Society of Eye Physicians and Surgeons' Focus: HOPE Eye Screening Program, was developed to provide eye screenings and free follow-up care to an at-risk population in an underserved area. The screening took place at the Focus: HOPE Westside food distribution center in Detroit, and local newspapers and radio stations promoted the event. Free eye screenings were given to 223 individuals who had come to receive food that day. Sixty-seven adults and 19 children were referred for follow-up care. Volunteer physicians and residents provided follow-up care at no cost. Screening participants were also surveyed for data that would be included in a study of the role of genetics in glaucoma. Osteopathic residents in the Detroit area participated and became active in the society as a result of the program.

Programs for Residents and New-to-Practice Eye M.D.s

Arkansas Ophthalmological Society developed its *Resident Mentor Program* to provide an informal means of contact between ophthalmology residents and a local Eye M.D. to enable residents to share their concerns or ask for guidance to enhance their professional experience, with the ultimate goal of increasing participation in local, state and national ophthalmology societies by utilizing ethical role models in private practice. The society developed a concept plan for the program, along with a mentor handbook. They solicited volunteer mentors from among their members and matched mentors with residents using a committee that included faculty from the residency program's department of ophthalmology. The society held a match reception where mentors and residents met one another, and followed-up with mentors to assess progress of the program and to encourage communication with the resident. The program has been a positive experience for residents and mentors, as well as the society, and future events have been planned to provide an opportunity for educational and social activities.

Tennessee Academy of Ophthalmology's Resident Mentor Program was developed by TNAO's Leadership Development Program participant to introduce young physicians to organized medicine by connecting them with TNAO mentors willing to share their professional experiences, wisdom and guidance. Through this program, the society also hoped to increase residents' awareness and practical expectations of the "real world" practice issue facing Eye M.D.s. The TNAO contacted the department chairs at in-state residency programs to get their support and involvement, developed promotional materials to use in soliciting mentors from among their members, and to solicit the participation of the residents. As a result of their participation in this program, residents are much more aware of the society's purposes, functions, and benefits, and have begun to participate in society activities and using it as a resource.

Member Web site or Web site feature

The **Ohio Ophthalmological Society** (OOS) began developing its Web site by surveying members regarding their key interests. They then planned sections of their site to meet the needs identified in the survey. The OOS wanted to develop a web site that would serve as an equal resource for the member and for the member's office staff. Their site (www.ohioeye.org) includes, *Community Resources*, including information on OOS public service initiatives and general patient information, a *Referral Service*, which allows site visitors to search for Eye M.D.s by specialty, then by city, zip code or county; an extensive *Membership* section, a *Legislation* section, providing legislative updates, links to the legislature, and information on their PAC; a *Practice Management* section and more. The society has also uses the site in conjunction with other means of communication by referring the audiences (member and public) to the site for additional information

Maine Society of Eye Physicians and Surgeons, wanted to create a web site that would benefit the public and its members, but that would not overtax the budget of their 65-member society. With this site (www.maineeyemds.com), they have provided a place for the public to locate a Maine ophthalmologist and learn about eye care resources in Maine, and to provided a secure online chat environment for members to discuss eye care issues and follow legislative activities. The site also includes a variety of links for use by members and patients, including links to the Maine legislature, national medical associations, Maine health care-related government agencies, medical journals, and patient support organizations.

Programs for Office Administrators or Ophthalmic Technicians

Massachusetts Society of Eye Physicians and Surgeons' developed its *Ophthalmic Technician Education Program* in response to a tremendous need among their members for competent, trained ophthalmic technicians. The programs objectives were to (1) recruit personnel to the profession of ophthalmic technician and to train and place them in *member practices* as quickly as possible; and (2) to provide supplemental education to individuals already working in ophthalmic practices. Funding for the program was obtained from Allergan, and 15 MSEPS board members taught the initial course. The society also established liaisons with Northeastern University and two community colleges to teach programs to their students under the auspices of the society. Over the first 12 months of the program, the society placed over 30 technicians in their member practices, and increased membership as non-members joined in order to take advantage of this new benefit.

2003 STATE AFFAIRS STAR AWARDS



Public Information/Public Service:

South Carolina Society of Ophthalmology: SCSO provided a great public service and increased the organization's visibility through its exhibit booth at the SC State Fair. Visited by an estimated 10,000 individuals, SCSO volunteers provided attendees with limited eye screenings and checklists as well as a geographical listing of all SCSO members statewide. To also educate attendees as to services of an Eye M.D., the SCSO purchased a significant quantity of patient information brochures on a variety of topics from the American Academy of Ophthalmology for distribution to exhibit booth visitors. SCSO volunteers provided videotape presentations on the various primary and medical-surgical services of an Eye M.D. and distributed complimentary sunglasses and candy to visitors who register for screenings in the offices of SCSO members across the state. SCSO members as asked to volunteer to staff the booth via announcements in the society newsletters. The SC State Fair is the most widely attended public event in SC. It also produces more attendees on Medicare than any other public event. This project is the only public service program of a medical (MD) organization at the State Fair. The SCSO was congratulated by the Medicare Director for South Carolina, AARP, and members of the State Legislature for sponsoring this program.

Programs for Residents and New-to-Practice Eye M.D.s

Michigan Society of Eye Physicians and Surgeons: Putting into practice the Secretariat for State Affairs encouragement to state societies to engage residents and new-to-practice ophthalmologists, the Michigan Society of Eye Physicians and Surgeons (MSEPS) Young Ophthalmologists Section (YOS) organized two family social events for YOS members, which include residents and attending physicians in practice for ten years or less. Funding was obtained from a commercial sponsor. The YOS organized and implemented the resident paper competition at the annual conference. One individual is chosen by each residency program to compete against residents from other programs with attending physicians voting for the winning papers. Prizes are announced and presented that evening at the annual banquet. In 2002, a poster division was added. Residents' Advocacy Programs were presented at four of the five residency programs. Participation was solicited through mailings, fax and email blasts and personal contact. An increasing number of residents and young physicians are becoming involved in the society. Those activities have resulted in the addition of a West Michigan YOS chapter in 2003.

Programs for office administrators and/or ophthalmic technicians

Ohio Ophthalmological Society

The Ohio Ophthalmological Society (OOS) 2002 Technician Clinical Meeting offered a unique format by offering three program tracks for those with different levels of expertise. Attendees could register for full day Beginner Track, Intermediate Track or Advanced Track or could choose sessions a la carte from among all three tracks (21 topics). OOS collaborated closely with the Joint Commission on Allied Health Personnel in Ophthalmology (JCAHPO) to develop the program and used the results of a survey of ophthalmic staff to guide them in program selection. OOS staff then secured speakers, handled meeting logistics, and marketed the event. The meeting, in which JCAHPO credits were provided, assisted physician offices with education of staff at a local, reasonable rate and resulted in the most comprehensive program for ophthalmic technician staff offered in Ohio. Attended by 374, the net effect is to keep office staff aware of OOS services that can help them and physicians, and benefits the practices of OOS members. To emphasize the benefit of OOS membership, staff registration fees were discounted for OOS members.

Educational Meeting for Members

Maine Society of Eye Physicians and Surgeons: The Maine Society of Eye Physicians and Surgeons (MSEPS) held its first *Annual Downeast Ophthalmology Symposium* in September 2002, the goals of which were: to provide CME of the highest caliber to MSEPS members at a Maine location thereby alleviating the need to travel outside the state; to generate non-dues income for MSEPS; to provide for the first time through MSEPS, education for ophthalmic techs in the state and; to provide a more extended opportunity for MSEPS members to meet socially. As a small society with less than sixty active members, this represented a major challenge whose final outcome was an unqualified MSEPS success. Approximately 100 were in attendance and they listened to an exemplary panel of out-of-state presenters from across the US and Canada. It is significant that MSEPS was able to attain \$35,000 in education grants. Execution of this first-time meeting required weekly conference calls amongst MSEPS physician leadership and staff and marketing included postings in various publications including *Eyenet* and *Ocular Surgery News* magazines, the Maine Medical Association's newsletter as well as on the MSEPS and AAO websites.

New York State Ophthalmological Society: Based on the significant number of requests NYSOS staff received from members for easy-to-understand information about the pending HIPAA Privacy Rule, the society responded by collaborating with six sister medical societies in developing three full-day courses – *How to Implement HIPAA Privacy* – in three major metropolitan areas of the state during March 2002. By partnering with the other medical societies, there were greater economies of scale and

Educational Meeting for Members (cont.)

division of responsibilities amongst the participating organizations. Staff of the participating partners shared responsibility for meeting logistics, including development of marketing materials, hotel arrangements, obtaining CME accreditation, accounting of funds and onsite registration. An unrestricted educational grant was secured to cover speaker honoraria, travel and lodging costs. NYSOS entered into a contract with a nationally recognized practice management consultant, which had developed an easy to understand *22-Step Guide to HIPAA Implementation* which was used as the manual for the programs. Those in attendance received the manual and a diskette with approximately two dozen sample forms and contracts that they could individualize for their own practice. With the smallest percentage of membership of all medical societies participating in the effort, Ophthalmology practices represented the largest percentage of attendees and response was so positive, the medical society partners agreed to offer two additional programs in November 2002. The HIPAA Privacy Programs generated \$14,000 in income over expenses for NYSOS. An additional profit of \$3,500 was generated for NYSOS by the sale of the manual and diskette to those unable to be in attendance.

Washington Academy of Eye Physicians and Surgeons: The Washington Academy of Eye Physicians and Surgeons' Annual Meeting resulted in a "first class" event with Category 1 CME by ensuring excellent speakers on four major topics that were of current interest to WAEPS members and combining it with a Coding and Reimbursement seminar and Ophthalmic Medical Personnel program. By combining these elements, WAEPS helped its members with "one-stop shopping" and reduced hotel stays and out of the office time. Another draw was the meeting's new Seattle waterfront venue which offered lower parking rates and excellent food choices. WAEPS Program Chair is a voting member of the WAEPS Board of Trustees and was invited to attend all Board meetings with a specific slot on the agenda to offer and receive program topic and speaker suggestions, along with ideas for the associated events. Bridging close ties with the University of Washington was enhanced by selecting the Chair of the Department of Ophthalmology as one of four keynote speakers. In addition to Board members, all WAEPS members were encouraged to recommend topics and speakers to the Program Chair. The meeting was marketed six to eight months in advance in a number of formats including through a flyer mailed to all members, in the WAEPS newsletter publication *In Focus* and on the society's website. One hundred sixty physicians and 35 exhibitors were in attendance and over \$10,000 in financial support was received to assist in cover speaker expenses. Social events included not only formal recognition of past WAEPS presidents but also a standing ovation for the Program Chair for an outstanding meeting and venue.

2004 STATE AFFAIRS STAR AWARDS



Alabama Academy of Ophthalmology *EyeCare Alabama*

The Alabama Academy of Ophthalmology's (ALAO) "EyeCare Alabama" program demonstrates how ophthalmologists are working to improve public eye health. According to the CDC, Alabama has the highest ratio of diabetics in the United States, and is in the lowest percentile among U.S. states for deficient dilated eye exams for diabetics. Working with the Alabama Quality Assurance Foundation (AQAF), which was charged by CMS to oversee quality of care provided to Medicare patients in the state and to increase dilated eye exams among Medicare's diabetic patients, the Alabama Department of Public Health and the University of Alabama-Birmingham (UAB) Department of Ophthalmology, Wonsuck Kim, MD, ALAO Vice President, developed EyeCare Alabama on behalf of ALAO to provide dilated eye exams to Medicare patients.

In phase I of this project, ALAO identified ophthalmologists to participate in the program by providing exams. AQAF then sent postcards to all Medicare beneficiaries who have diabetes but had not had dilated exams during the previous two years. Dr. Kim appeared on a live show with call-ins on Alabama Public Television to make the public aware of the necessity of regular diabetic eye exams and to highlight ophthalmologists' volunteer efforts in underserved counties via EyeCare Alabama. The ALAO held a clinic in Demopolis, a city in one of Alabama's poorest counties.

ALAO Executive Director, Mike Merrill, recently announced that ALAO will partner with the Community Care Network of Alabama to promote its EyeCare Alabama initiative and improve the quality of eye care in Alabama's Black Belt Region.

Established in 2000, the Community Care Network (CCC) helps the medically underserved by coordinating the volunteer efforts of physicians, nurses, dentists, nutritionists, therapists and other medical professions-with the support of faith-based organizations-to offer free medical evaluation and treatment, primarily in those areas of Alabama where citizens do not have access to medical care and/or are without the financial resources to seek such assistance.

Through its association with the CCC, ALAO will have access to CCC's \$500,000.00 "Care-A-Van" Mobile Medical Unit that will be available for on-site evaluations. Numerous ALAO physicians have already volunteered to staff the van when needed. "Care-A-Van" is a fully functional medical facility, complete with two examination rooms and a medical lab. According to Dr. Kim, "Our association with the CCC is a win-win for both organizations. We both offer what the other group wants and needs."

Massachusetts Society of Eye Physicians and Surgeons
Shaken Baby Syndrome and Child Abuse Prevention Initiative

The society partnered with a variety of Massachusetts organizations involved in child abuse prevention to raise awareness among health care of the symptoms of Shaken Baby Syndrome. These organizations included medical societies, child advocacy groups, hospitals, law enforcement, and more. The MSEPS solicited volunteers for this effort from among pediatric ophthalmologists. They sought and received funding from the Massachusetts Medical Society (MMS) and the ProMutual Insurance Company.

The MSEPS developed two one-day courses on trauma and abuse: one for physicians and the other for ophthalmic technicians. The MSEPS developed a “reading card” that will be reproduced by the MMS and distributed to ophthalmologists, emergency room physicians, pediatricians, and primary care providers in New England. They are also developing a video in conjunction with the Matty Eappen Foundation to be shown at pre-natal education seminars. The society also prepared a clearinghouse of materials for physicians to reference when called to testify in child abuse cases.

North Carolina Society of Eye Physicians and Surgeons
Southeast Regional Ophthalmology Residents/Fellows Meeting

The Southeast Regional Ophthalmology Residents/Fellows Meeting was developed to bring together ophthalmology residents and fellows from across the Southeastern United States for a one day session on non-clinical issues, including legislative advocacy, practicing in a managed care environment, and leadership development. The program was designed to be complementary to the Residents Advocacy Program (sessions) promoted by the AAO. Organizers sought and received grant support, and support from the North Carolina Medical Society

Approximately 65 residents and fellows from seven states attended the meeting. Meeting facilities, meeting registration fees, lodging, speaker honorariums, meals, entertainment and local transportation were all paid for with grant support.

Pennsylvania Academy of Ophthalmology
FOCUS – Pennsylvania’s Ophthalmology News

The PAO recognized the increasing importance of the administrative and legislative aspects of ophthalmology practice. In addition, members were deluged with bulletins and articles from a wide variety of societies and groups but were in need of more current, state-relevant information. Therefore, the PAO designed the FOCUS news bulletin format as a flexible tool which provides members with timely information that is important for the ophthalmology practice in Pennsylvania.

FOCUS replaced the standard quarterly newsletter and is distributed monthly or as news is happening. The design of FOCUS allows the PAO leaders to provide news in a faster, more convenient format, which can be faxed, emailed or mailed, depending on the member’s

preference. Issues of FOCUS are specific to one of four different areas: Regulatory Update, Coding and Reimbursement, Academy News, and Legislative Update. FOCUS also has an “ALERT” format that is used to distribute timely information by way of fax and email.

Member feedback prompted the PAO to change from the quarterly newsletter to the FOCUS model. Members felt that the size of the quarterly newsletter was cumbersome, and often contained news that was no longer relevant by the time the newsletter was produced and distributed.

A variety of 15 editions of FOCUS, including updates and alerts, were distributed to members in 2003. Surprisingly, the PAO found that they actually saved money on production costs for the news bulletin over the amount spent previously on the production of a quarterly newsletter. Although FOCUS was distributed to members 15 times in 2003, PAO found that they actually saved money on production costs over that spent on the quarterly newsletter.

2005 STATE AFFAIRS STAR AWARDS

Arkansas Ophthalmological Society Sight Savers Program

The Arkansas Ophthalmological Society's Sight Savers Program is a community awareness and glaucoma screening program that seeks to inform the public about the prevalence and effects of glaucoma in effort to prevent vision loss. The AOS program targeted Arkansans who do not have easy access to eye care. AOS member volunteers were solicited to give comprehensive eye exams, including glaucoma screenings. The AOS worked with an established community free clinic to incorporate the Sight Savers Program. The AOS Sight Savers Program has also taken a mobile unit with screening equipment to provide a free glaucoma screening at a local discount department store. Student volunteers from the Jones Eye Institute and the University of Arkansas College of Medicine help at the screenings and free clinic. Further screenings are planned 2005 in conjunction with the Arkansas Minority Health Commission.

Connecticut Society of Eye Physicians Health Plan Relations Program

In February 2004 Connecticut ophthalmologists began seeing Aetna's Explanation of Benefit Statements denying OCT and GDX (99213) procedures, citing "experimental services and supplies are not covered under the member's plan." There was some confusion at this new development, since Aetna had previously paid for this procedure

CSEP quickly responded by calling upon its members to send complaints to the Commissioner of Insurance. In March 2004, the Director of Consumer Affairs for the Connecticut Department of Insurance agreed to arrange a meeting with CSEP and Aetna to discuss this matter. A meeting was finally solidified for December 2004. CSEP leaders and Connecticut State Medical Society representatives met with Aetna's legal and medical team including Aetna's CT Medical Director and Aetna's National Medical Director at the insurance commissioner's office, to discuss the numerous denials on 99213.

At that meeting, CSEP leaders presented scientific data supporting the usefulness of these procedures, and explained that Aetna's inconsistencies in paying for this procedure from 2000-2003 lead providers to believe that 99213 was a covered benefit and would be paid for in 2004. In January 2005 Aetna wrote a letter to the Department of Insurance in support of their decision to deny payment on 99213 and stating that previous payments for 99213 were in error and subject to collection by Aetna. CSEP quickly mobilized by filing a formal external appeal with the Department of Insurance requesting a review by an independent utilization company to determine whether or not 99213 was experimental in nature. Before a determination could be made on this appeal, Aetna released a new policy on Optic Nerve and Retinal Imaging Methods.

New Jersey Academy of Ophthalmology NJAO On The Road

The New Jersey Academy of Ophthalmology instituted the NJAO On The Road program as a component of its membership recruitment and retention efforts. Through NJAO On the Road, the society hosted complimentary dinners in five locations throughout the state, to which all member and non-member ophthalmologists in New Jersey were invited to attend with a guest. A promotional brochure for the program was created and mailed to all New Jersey Eye M.D.s, and NJAO On the Road was also promoted in the society's monthly member publications. Costs for the dinner were underwritten by a corporate sponsor. In addition to hearing a brief presentation from the sponsor, attendees also heard a presentation from an NJAO leader about the society's activities and programs. These meetings netted the society many new members, increased the visibility of the society's activities among New Jersey Eye M.D.s and increased contributions to the state Eye PAC.

Massachusetts Society of Eye Physicians and Surgeons Preschool Vision Screening Initiative and Implementation

The Massachusetts Society of Eye Physicians and Surgeons collaborated with the Massachusetts Society of Optometrists to secure the passage of a bill requiring preschool vision screening. This bill was signed into law in July, 2004. MSEPS leaders further collaborated with the Massachusetts Dept. of Public Health to develop the regulations to implement the new legislation as well as to develop educational materials in support of that effort. MSEPS also developed a presentation on screening protocol that was made available on the Dept. of Public Health Web site for physicians to download (<http://www.mass.gov/dph/fch/schoolhealth>, click "screening").

Support and help of member Eye M.D.s was solicited to conduct training workshops, grand rounds, etc. to educate school nurses, family physicians and pediatricians on the new protocol. MSEPS established a broad-based coalition of groups interested in the issue and worked to alleviate any concerns they expressed about the new mandate. MSEPS has met with representatives of over 20 groups, such as Prevent Blindness, the state school nurses association, the family physicians society, the state pediatrics society, the state medical society, and the Dept. of Public Health, to answer their questions and concerns about the new protocol and to educate them on how to screen appropriately.

Washington Academy of Eye Physicians and Surgeons Increase WAEPS Members PAC Contributions

In order to improve the society's preparedness to address scope of practice and other legislative issues that might arise in the legislative cycle, the Washington Academy of Eye Physicians and Surgeons implemented a program directed at increasing their members' contributions to the state Eye PAC. By strengthening the PAC, the society hoped to provide Eye M.D.s a stronger voice in the state legislature, to become more flexible and adept in the ever-changing political environment, and to be better prepared financially to take legislative action – both reactive and proactive – when critical ophthalmic and medical issues arise.

The society revamped its dues statement to collect both membership dues and PAC contributions. The statement provided members with an option to decline to make the PAC contribution by checking a box next to a statement which read "I do not want to support WAEPS legislative efforts to maintain the highest quality eye care or help ensure that surgery is

performed only by medical or osteopathic surgeons by contributing to the Physicians EyePAC. I am choosing to pay the WAEPS Membership rate only.”

A letter of explanation from the WAEPS President went out with the dues statement with a rationale for the change. A few members objected to the effort, but their concerns were alleviated through a number of telephone conversations. Ultimately, member participation in the WAEPS' PAC increased from 14% to 70% with no members lost as a result of the campaign.

2006 STATE AFFAIRS STAR AWARDS



Indiana Academy of Ophthalmology Political Action Committee Newsletter

The Indiana Academy of Ophthalmology's purpose of the Political Action Committee Newsletter is to generate more interest/excitement about the IAO PAC and advocacy. Benefits to the members include increased PAC contributions for increased political contributions for increased access. This was an idea of the IAO Legislative Committee. All IAO members (and even non-members) receive the newsletter. The Newsletter has generated very positive feedback. They have received a number of compliments from membership and best of all after every newsletter goes out IAO receive s between 5-8 PAC contributions. The newsletter solicitation has been very successful in getting some members who have never contributed to the PAC to do so.

Maryland Society of Eye Physicians and Surgeons

THE EYE SITE

THE EYE SITE, A Traveling Exhibit on Low Vision, hosted at area shopping centers, illustrates for the general public, through interactive multimedia kiosks, what it is like to have low vision – the warning signs, the causes and what can be done about it. This *National Eye Institute* initiative presents a wonderful opportunity to educate the public, especially seniors; about low vision and how low vision rehabilitation can help people lead independent lives. In addition to the important public awareness message, this format afforded MSEPS and its members the opportunity to demonstrate the positive effects of collaboration by the entire medical community; researchers educators, paraprofessionals and MDs.

Texas Ophthalmological Association PatientsFIRST Coalition

PatientsFIRST was formed for the sole purpose of fighting scope of practice expansion among limited license practitioners at the legislative and regulatory levels. The uniting of various specialties increased the visibility and strength of each individual specialty. Below is the text of the introductory handout explaining the group: PatientsFIRST A coalition for the protection of Texas Patients! Alarmed by proposals to lower the standards of medical care, Texas physicians and have united to form PatientsFIRST. PatientsFIRST is a coalition of medical and osteopathic physicians created to protect patient safety and osteopathic physicians created to protect patient safety and ensure that Texas patients receive the best medical care. The expansion of the scope of practice lowers the standard to medical care and places our patients at risk. Allied health professionals, who include optometrists, podiatrists, psychologists, nurses, midwives and chiropractors, will attempt to expand the medical scope of practice, solely for their own personal gain. Any expansion of the medical scope of practice will place undue risks on the families of Texas. The allied health professionals will ask you to put the safety of our family members at risk for their financial gain. Texas physicians have always made our patients' health and safety their top priority, and have worked to deliver the highest quality of care for all patients. To do so, physicians will continue to demand that medicine be practiced by the most qualified and competent physicians who uphold the highest ethical and professional conduct. The allied health professionals will ask you to lower the standard of medical care that your constituents and family members will receive in Texas. The attack on patients' safety in Texas will take

many forms, here are just a few indefensible positions the allied health professionals will ask you to vote on, against the health and safety of your constituents: * optometrists who want to perform surgery on the eye * Psychologists who want to prescribe dangerous drugs * chiropractors who want to be primary care physicians* podiatrists who want to operate on the leg * nurses who want to independently practice medicine * midwives who want to proscribe dangerous drugs. Their approach is selfish and dangerous; none of them went or want to go to medical school to become a Physician! Through the PatientsFIRST coalition, physicians will vehemently oppose any efforts to expand any medical scope of practice. The legislature must continue to protect patients by restricting allied health professional to services that are within the scope of their education and training. The primary consideration for all involved in regulating the scope of medical practice is and should be the health and safety of the patient. Only physicians are qualified to practice medicine and to exercise independent medical judgment, plain and simple! Don't create shortcuts! Don't jeopardize patient safety by supporting a bill that substitutes legislation for medical education! Don't LOWER the standard of medical care our Texas patients deserve!

2007 STATE AFFAIRS STAR AWARDS

Connecticut Society of Eye Physicians ***Medical Liability Reporting for Optometrists***

The Connecticut Society of Eye Physicians (CSEP) worked to enact legislation that requires optometrists to report complaints and lawsuits to the state for public inspection. The State of Connecticut had implemented a medical liability reporting depository for residents which excluded allied health professional such as optometrists, podiatrists, and chiropractors. CSEP felt it was unfair to mandate MDs to report all medical liability claims when optometrists did not have to meet these same requirements, so it launched this proactive effort. CSEP developed a working plan that included bill language, organized testimony by their members to support the bill, and orchestrated an extensive grassroots effort in support of the bill. CSEP also worked closely with the state medical society and other subspecialty medical organizations to increase awareness of the bill, and to help the other organizations develop testimony in support of the bill. Connecticut's medical liability reporting for optometrists bill (SB 249) is the first such legislation to be passed in the United States.

Minnesota Academy of Ophthalmology ***MAO Stop Optometric Surgery Fund***

Starting out as a 2004 AAO Leadership Development Program project, the Minnesota Academy of Ophthalmology's (MAO) *Stop Optometric Surgery (SOS) Fund* was formed to support the society's legislative activity. The MAO SOS Fund was designed to serve as an emergency monetary reserve specifically earmarked to support MAO's efforts to oppose any scope of practice legislation which would allow optometric surgery in Minnesota. The statewide fundraising campaign included personal mailings to MAO members, messages in the MAO newsletter, and personal visits by MAO board members to ophthalmology practices to solicit donations to the MAO SOS Fund *and* to encourage contributions to the AAO Surgical Scope Fund. Each MAO member was asked to donate annually to the MAO SOS Fund, and to date the majority of members have contributed. The MAO SOS Fund has built up significant financial reserves, and with scope of practice issues becoming more common throughout the country, MAO has taken a more proactive stance in becoming financially prepared to fight and win a scope of practice battle.

Ohio Ophthalmological Society ***Technician Training School***

The Ohio Ophthalmological Society (OOS) recognized that its members were experiencing difficulty in obtaining training for ophthalmic technicians. To address this concern, OOS developed its *Ophthalmic Technician Training School* to provide classroom instruction for technicians taking the home study course. OOS surveyed office managers of member practices and asked if they would send newly hired techs to a course to provide a baseline of knowledge. Ophthalmologists helped plan the course, served as lecturers, and volunteered their offices for some sessions. Sessions were held every two weeks and included lectures and hands on training at different facilities around Columbus, Ohio. Thirty-five technicians took the course, went on to complete the home study test, and are in the process of becoming certified. This

pilot program in Columbus received great feedback and OOS hopes to expand it to other Ohio cities.

**Washington D.C. Metropolitan Ophthalmological Society
WDCMOS Membership Drive**

With 55 dues paying members and only 22 society members in attendance at the Washington D.C. Metropolitan Ophthalmological Society's (WDCMOS) September 2006 academic meeting, society leaders decided that the WDCMOS needed a membership overhaul. WDCMOS launched a comprehensive membership campaign that included a focus on academic programs. WDCMOS also created benefits for their members, including group purchasing discounts at Staples and Paychex, an 8% discount for society members on malpractice dues, and improved scientific programs with nationally renowned presenters. Through this effort, WDCMOS nearly doubled its membership to just over 100 dues-paying members, and the next three WDCMOS educational meetings have each had over sixty members in attendance. Society staff and board members consistently hear how excited members are about the meetings and about the society. The executive committee of WDCMOS completed a transforming membership drive that resulted in an invigorated, enthusiastic membership that they hope to harness as the society moves forward.

2008 STATE AFFAIRS STAR AWARDS

Massachusetts Society of Eye Physicians and Surgeons *Ophthalmic Assistant Training Program*

In response to a widespread shortage of ophthalmic technicians, the Massachusetts Society of Eye Physicians and Surgeons (MSEPS) teamed up with Bunker Hill Community College to offer an eight-week training course for ophthalmic assistants, which began with one week of classes followed by a six week externship and concluded with a week of lectures and hands-on learning. The tuition was \$1500.00. MSEPS offered two \$500.00 scholarships.

The goal of the project was to bring new people into the field, and the project succeeded in placing twelve entry level technicians into area practices. MSEPS is hopeful that these new techs will go on to be certified and will have years of employment in the field. Several other Massachusetts community colleges are interested in collaborating with the MSEPS on similar programs. The success of the course owed in great measure to the participation and commitment of MSEPS members and their practices. The society reached out to members via mailings, the newsletter, email messages and personal phone calls to gain participation, and garnered an overwhelming interest among practices to serve as externship sites.

Pennsylvania Academy of Ophthalmology *Current Concepts in Ophthalmology*

Current Concepts in Ophthalmology is an educational publication of the Pennsylvania Academy of Ophthalmology (PAO) that is intended to keep primary care physicians up-to-date on advances in eye care so that they can appropriately advise patients on matters relating to the preservation or restoration of vision. The goal of *Current Concepts* is to provide useful information on a variety of ocular conditions and to educate primary care physicians on advances in eye care.

Until 2003, *Current Concepts in Ophthalmology* was published as an annual four-color journal. The publication was discontinued due to the expense of publication and the difficulty finding a new volunteer medical editor. The PAO's board of directors decided to re-introduce it as a smaller newsletter that would be distributed three to four times per year. Partial funding was secured through a \$10,000 grant from the Commonwealth of Pennsylvania's Department of Community and Economic Development. Three volumes were published in 2007, and each volume focused on one ophthalmic condition and current treatments, including: Diabetic Retinopathy, Macular Degeneration and Glaucoma. The newsletter was mailed to over 10,800 primary care physicians in Pennsylvania. Each edition was also posted on the PAO Web site, www.paeyemds.org.

PAO has received a positive response from primary care physicians, with many calling to ask when future volumes will be published. PAO members have benefited from the increased visibility of ophthalmology among primary care specialties.

Virginia Society of Ophthalmology
Legislative & Regulatory Affairs Program

While scope of practice issues often dominate the legislative activities of a state ophthalmology society, there are many issues and concerns that must be addressed in a state governmental affairs program. The Virginia Society of Ophthalmology (VSO) engaged in a multi-faceted legislative and regulatory affairs program. The VSO advocated against an insurer's effort to waive consumer protections established by the state. They submitted written comments, arranged for an Eye M.D. to speak at a hearing, and coordinating those efforts with other medical subspecialty societies. The VSO also hosted dinner meetings with key legislators and small groups of ophthalmologists. Eye M.D.s had an opportunity to voice their concerns on key issues to key legislators. The VSO also advocated on behalf of Virginia retinal specialists for expansion of OCT scanning in the treatment of ARMD. This effort lead to a Medicare provider agreeing to expand codes for OCT use.

2009 STATE AFFAIRS STAR AWARDS

Georgia Society of Ophthalmology *Winter Clinical Symposium*

After considering ways to enhance the value of membership in GSO and identifying a need for educational programming that would meet requirements for Board recertification, the GSO investigated the idea of instituting another CME activity for members. A core group of GSO members who had never attended a GSO annual meeting were surveyed to assess their needs for educational opportunities and level of perceived value of their membership. Many members, including residents and early-career ophthalmologists, indicated that they could not or did not want to expend resources and time away from the office to attend the annual meeting. An overwhelming majority of respondents indicated they would attend a clinically focused, one-day symposium held in Atlanta.

While the society knew it had the ability and capacity to deliver another CME meeting, there was concern about the financial risk of such an undertaking, in light of the declining economy and uncertain future of industry support. After discussions and thorough budget analysis, GSO leadership agreed the society would launch a second CME program.

The first GSO Winter Clinical Symposium was held in Atlanta in 2008 and drew record attendance. GSO also discovered that by holding a clinically focused activity excluding traditional social activities in a non-resort location, they were able to secure more medical education grants from industry supporters. Through this event, GSO provided an additional six hours of CME in a season of declining revenue sources that increased membership value, involved residents and young ophthalmologists, strengthened the educational program, attracted additional vendor support, and enhanced the financial stability of the society. The first Winter Clinical Symposium resulted in a net profit of over \$40,000.

Indiana Academy of Ophthalmology and Kentucky Academy of Eye Physicians and Surgeons *Annual Report and Member Benefit Tracking*

The two societies annually promote the value of membership in their societies to current and future members by developing and distributing an annual report that highlighted the societies' activities, programs, and member resources. The Annual Report serves as a reminder to the membership of the successes of the organization in the past year and sets out the goals for the coming year. In coordination with the annual report, each society also distributes an individualized report to members highlighting how each made use of the society's resources over the previous year. This Member Benefit Tracking report gives each member a personal update on the association benefits each has taken advantage of in the previous year.

The Annual Report and Member Benefit Tracking report are mailed to each member approximately 10 days prior to distribution of the annual dues invoice. Members have responded positively to Annual Report, and most notably the Member Benefit Tracking report. The Indiana and Kentucky societies also believe that the contributions to their PACs have increased, because the tracking report reminds members that they have not participated for the year.

Pennsylvania Academy of Ophthalmology Grassroots Advocacy Campaign

The goal of the Pennsylvania Academy of Ophthalmology's grassroots campaign was to have ophthalmologists personally meet with legislators and ask them to consider sponsoring a bill that would define ophthalmic surgery in the Medical Practice Act. Their strategy was to have a significant number of sponsors for the legislation in order to increase the chance of success once the bill was introduced.

A committee of PAO board members was formed in order to implement the grassroots advocacy strategy. The committee held monthly conference calls. During each call, the PAO lobbyist reviewed a list of legislators who were potential candidates for sponsoring the bill. The executive director prepared lists of PAO members who were constituents of these legislators, and then the committee considered which members might be effective in communicating to legislators why a definition of ophthalmic surgery was needed. Committee members then personally contacted the members and asked them to meet with their legislator.

Talking points were developed to help members prepare for their meetings and the lobbyist spoke to each physician in order to give him/her background information on the legislator's history with medical/ophthalmology issues as well as other tips on meeting with lawmakers.

The PAO grassroots advocacy campaign culminated in an Advocacy Day at the Capitol. Advocacy Day was marketed to PAO members through mailings, blast emails and faxes, as well as through our newsletter. Regional Ophthalmology Societies, such as the Pittsburgh Ophthalmology Society, also encouraged members to attend. Twenty-nine ophthalmologists participated in Advocacy Day. A briefing session was held in the morning at a local hotel, then the group walked to the Capitol for their pre-scheduled appointments with senators and representatives.

Feedback from members who met with legislators was positive. Most expressed that they appreciated being more involved in the political system and having the opportunity to build a relationship with their legislators. Lawmakers told PAO lobbyists that they were happy to see ophthalmologists take the time to visit them in Harrisburg. The introduction of a bill defining ophthalmic surgery in the House of Representatives (HB 1188) was a direct result of Advocacy Day. Forty-five representatives (over 25% of the House) co-sponsored HB 1188 and most of the 45 co-sponsors received a personal visit on Advocacy Day.

2010 STATE AFFAIRS STAR AWARDS

Arkansas Ophthalmological Society ***Campaign to Educate Legislators about*** ***Vision Screening and Comprehensive Eye Exams***

Owing to a turnover of term-limited legislators in the Arkansas General Assembly, the Arkansas Ophthalmological Society (AOS) called upon its members to engage in an ongoing dialogue with their legislators regarding the practice of medicine in order to educate the legislators and establish relationships with them. Upon learning in early January of proposed legislation in Arkansas that would mandate comprehensive eye exams for children, the society sent a legislative alert to members encouraging them to communicate with legislators that vision screening was both medically effective as well as the cost effective as compared to mandated comprehensive exams for children.

Over the next two months, the comprehensive eye exam bill was introduced, and AOS leaders worked the Academy, state medical society, the children's hospital lobbyist, and other partners on research and strategy to defeat the bill. The society provided status updates and talking points to members via email and fax, and AOS executive committee also made phone calls to members updating them on the progress of the bill. Through its members, the society reached also reached out to family physicians. AOS mobilized their leaders and their members, and others to get their message out to legislators – particularly those serving on public health committees – and the Governor's office.

Due to their early, aggressive intervention, AOS was ultimately able to derail the comprehensive eye exam bill – *before* it received a committee hearing.

Iowa Academy of Ophthalmology ***Sight for Soldiers***

Spectacles and contact lenses can be hazardous in a combat situation, but are particularly so in Afghanistan and Iraq where the climate is extremely dry and dusty. With this fact in mind, the Iowa Academy developed *Sight for Soldiers*, a program which provided discounted refractive surgery for 116 Iowa National Guard soldiers deploying to Afghanistan and Iraq in 2010.

The society undertook this program to express its appreciation to troops for their sacrifice, better equip them to safely and effectively accomplish their mission, project to legislators and citizens a proactive image of the Iowa Academy, and raise public awareness of ophthalmology by emphasizing our exclusive role as eye surgeons.

Once guidelines were established with the Iowa National Guard, refractive surgery practices were contacted and invited to participate. A list of discounts and covered services were then compiled. The list was distributed by the Iowa National Guard to soldiers – who then made independent decisions as to where to seek treatment. Funds were also raised from corporations

and service organizations to further defray the cost to the troops. The program was publicized on the Internet, in print media, and on radio and television news programs.

In addition to helping the troops, this project built a sense of unity among the Iowa Academy of Ophthalmology – with member and non-member ophthalmologists participating in the project

New York State Ophthalmological Society New York Coalition of Specialty Care Physicians

Supported in part by an Academy QECPS grant, the New York Coalition of Specialty Care Physicians was established to pool the lobbying activities, expertise and staff resources of several medical associations for the purpose of defeating allied health provider scope of practice initiatives in New York. This project was undertaken in acknowledgment of the fact that as a small specialty, ophthalmology needs to join forces with other groups to increase clout and enhance opportunity for success in legislative and regulatory battles.

NYSOS staff reviewed organizational information for recognized state specialty societies, and identified potential partners with common interests. Ten groups, including the state medical society, participate on the 2010 Coalition. Coalition members were required to sign a Memorandum of Understanding that delineated roles, responsibilities and expectations of Coalition members, and designated representatives of Coalition member organizations who would have decision-making authority.

A schedule of regular conference calls was established, and the group undertook to define a range of projects it would undertake. The coalition's first project was a Joint State Lobby Day, which included a briefing on key scope issues of participating specialties, and joint visits with State Senate and Assembly members. Printed postcards were sent to all state legislators in advance of the event, using the coalition logo. Additionally, the coalition distributed legislative memos on 12 bills to state legislators.

In conjunction with the lobby day,

- NYSOS staff coordinated a fundraiser for six key state legislators,
- an issue briefing was held for the 100+ physicians participating in the lobby day, with each coalition partner given podium time to summarize their talking points,
- the coalition held a press conference, and
- the coalition sponsored an exhibit table at a concurrent health fair.

The lobby day was very successful, and feedback from state legislators was quite positive. The coalition is off to an excellent start, and NYSOS is commended for its efforts in launching this partnership.

2011 STATE AFFAIRS STAR AWARDS

Connecticut Society of Eye Physicians ***Medicine United: Special Forces***

CSEP created a multispecialty physician advocacy coalition, the goal of which was to unite medical and surgical specialty societies into an effective coalition for the purpose of creating legislation to protect surgeons and physicians and their patients. The coalition proactively seeks legislative solutions for unfair contracting between physicians and managed care. The coalition also spreads awareness by promoting truth in advertising and transparency in healthcare.

CSEP dedicated staff and financial resources to organizing the coalition. Input was sought from representatives of each coalition member organization to identify scope of practice concerns that could be addressed during the legislative session. CSEP took the lead in writing testimony on several coalition bills, and designed and implemented an "on call" schedule for physicians to testify on proposed legislation. This schedule was very effective because it ensured that a physician was available to testify on every date on which a public hearing might be scheduled. In addition, CSEP followed each bill through the legislative process, providing updates to each coalition representative.

The coalition was ultimately able to pass four out of the six bills that it supported, including: truth in advertising; ban of "most favored nations" clauses in physician/MCO contracts; standards in contracting legislation; and, legislation calling for the Department of Public Health to review and process any request for expansion of scope for a profession.

Florida Society of Ophthalmology ***Informed Consent for Cataract Surgery***

The Florida Society of Ophthalmology played a crucial role in securing passage of legislation to improve medical liability fairness in cataract surgery. Prior to the 2011 Legislative Session, Florida law failed to describe the recognized risks of cataract surgery. A substantial number of "recognized risks" associated with cataract surgery have been improperly reported to regulators as "Code 15" adverse incidents. Over-reporting has unnecessarily exposed Florida ophthalmologists to extensive and time-consuming disciplinary proceedings before the Board of Medicine and to medical malpractice litigation. During the 2011 legislative session the FSO worked closely with the Florida Medical Association, sponsor of House Bill (HB) 479-Medical Liability Fairness, to provide language in this bill that would require the Florida Board of Medicine (BOM) and Florida Board of Osteopathic Medicine (BOOM) to adopt by rule a standardized consent form for cataract surgery. The legislation stated that an incident resulting from a recognized risk that is mentioned in the consent form would not be considered a Code 15 adverse incident and, therefore, would not require reporting. HB 479 was passed during the 2011 Legislative Session and signed into law in June 2011. The collaborative effort of FSO and FMA demonstrates the importance of organizations working together and sharing resources.

Subsequent to passage of HB 479, the FSO provided the BOM and BOOM with a draft of the comprehensive consent form and made the draft form available to FSO members via the society

web site. FSO leader Bradley D. Fouraker, MD worked with the subcommittee appointed by the Florida Board of Medicine on a final draft of the consent form. FSO plans to provide members with an updated version based on the BOM/BOOMs revised/recommended form.

Cataract surgery is the most commonly performed surgery in Florida. FSO believes that this standardized consent form for cataract surgery will serve as resource for all ophthalmologists in Florida by carefully outlining the risks of this surgery to patients.

Ohio Ophthalmological Society ***Play Hard. Don't Blink. Prescription Goggle Program***

For more than ten years, the Ohio Ophthalmological Society's (OOS) *Play Hard. Don't Blink.* program has sought to educate parents, children, and team coaches on sports eye safety, and to provide children with protective eyewear designed to reduce eye and facial injuries. The OOS has expanded this program to provide free prescription sports goggles to any qualifying child from a low-income family who currently wears glasses or contacts. The goal for the first year of the prescription goggle program was to distribute goggles to 250 children, however OOS was able to provide prescription goggles to more than 600 children. The program is marketed through ophthalmology and optometry offices, school nurses, community health centers, and recreation centers. The program has also begun expanding to partner with Medicaid HMOs. OOS member offices that have an optical shop can participate in the program, and those without optical shops may distribute information about the program to their patients.

The program has far exceeded expectations with now almost 20 prescriptions being filled every week and OOS has received positive feedback from providers and patients. For more information about the *Play Hard. Don't Blink. Prescription Goggle Program*, visit www.playhardgear.com.

Secretariat for State Affairs
American Academy of Ophthalmology
society_relations@aao.org