

Academy Notebook

NEWS • TIPS • RESOURCES

WHAT'S HAPPENING

Highlights of the First Virtual Advocacy Day

On May 12, a total of 170 Academy members met over the phone and Zoom for Virtual Advocacy Day. They participated in more than 100 meetings with congressional offices from 36 states and Puerto Rico, including 15 meetings directly with their members of Congress, and the rest with congressional staffers.

Academy members described the challenges that they have had to overcome to provide eye care during the pandemic and explained how regulations can help, or hinder, their efforts to safeguard the nation's eye health.

Lee Snyder, MD, and colleagues met with several aides to Maryland lawmakers and highlighted the effect of the COVID-19 outbreak on practices and patients. They pointed out that, in order to rebuild practices, telemedicine visits need to continue to be reimbursed at a higher rate, and the terms of repayment for Medicare Accelerated and Advance Payment Programs need to be eased, she said. "It was crucial to be able to talk with elected officials and their staff members. We let them know that we are still here, caring for patients with potentially blinding diseases. The meetings also allowed us to put a per-

sonal face on the challenges of adapting to a new kind of patient care over the next weeks and months."

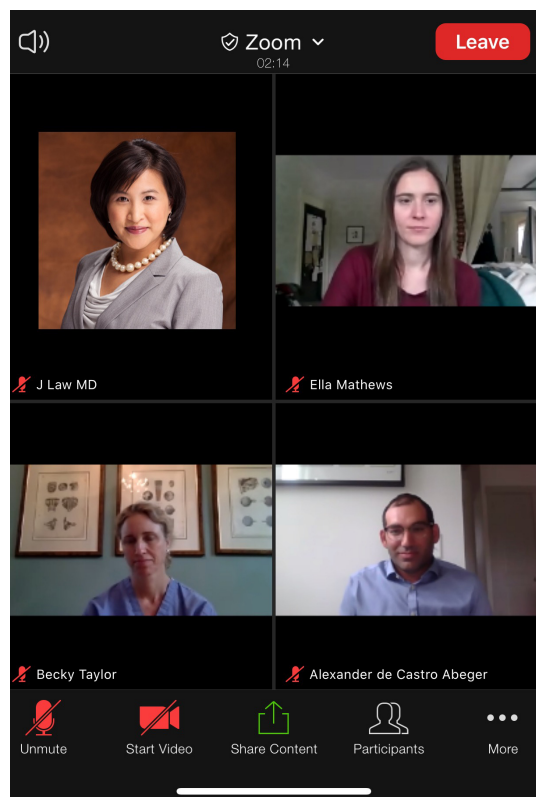
Ophthalmologists also educated lawmakers and staff on how prior authorization and step therapy requirements can affect the ability to effectively treat even urgent patients. Linda Feero, MD, and Erin Lichtenstein, MD, met with Sen. Susan Collins, R-Maine, who chairs the Senate Special Committee on Aging. "Senator Collins is very sensitive to the perils of step therapy due to a family member's unfortunate experience with this burdensome policy," Dr. Feero said. "She requested that the Academy follow up with her staff to share some additional examples of how patients have been impacted during the COVID-19 pandemic." (Academy staff members have provided Sen. Collins the requested information.)

Illinois Society of Eye Physicians & Surgeons President Sohail Hasan, MD, PhD, said the Virtual Advocacy Day was a productive way to meet with policymakers while maintaining social distancing guidelines. "Last year, during Congressional Advocacy Day, we met with the health legislative aide to Rep. Dan Lipinski, [D-Illinois]," he said. "I found this year's meeting even better. We had a great conversation, and the aide responded almost immediately to

my follow-up email. He was particularly sympathetic to our profession for providing care to our patients during this unique time in history. I don't know what more we could hope for in reaching out to our legislators."

The Academy staff scheduled all meetings, provided training, and issued materials to prepare participants for a successful call. The event replaced Congressional Advocacy Day, which was canceled along with the Mid-Year Forum due to the COVID-19 pandemic.

Missed the meeting? Head to aao.org/volunteering and click "Advocate" to learn how you can get involved.



VIRTUAL ADVOCACY DAY. In place of Congressional Advocacy Day, which was canceled due to the COVID-19 pandemic, the Academy hosted a Virtual Advocacy Day on May 12. Academy members participated in more than 100 virtual meetings with congressional offices.



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TAKE NOTICE

Meet the Aug. 1 Deadline for IRIS Registry–EHR Integration

Are you participating in the Merit-Based Incentive Payment System (MIPS) this year? The least onerous way to report quality measures is to integrate your electronic health record (EHR) system with the IRIS Registry. You may do so this year if:

- you registered for IRIS Registry–EHR integration by June 19, 2020, or
- you had previously registered for the IRIS Registry web portal and then notified the IRIS Registry vendor (FIGmd) by June 19, 2020, that you wanted to migrate to IRIS Registry–EHR integration.

In addition, you need to complete the integration process by Aug. 1, 2020. Meeting this deadline requires that you are actively involved in the process and respond promptly to emails from FIGmd.

The IRIS Registry is your one-stop shop for MIPS reporting. You also can use the IRIS Registry to manually attest to promoting interoperability (PI) measures and improvement activities. If you aren't able to report quality via IRIS Registry–EHR integration, you can manually enter data for quality measures.

Free for members. Why pay fees to your EHR vendor for MIPS reporting? The IRIS Registry is a free benefit for U.S. Academy members.

Learn more at aao.org/iris-registry.

You May Get MIPS Credit for COVID-19 Research

This spring CMS announced a new high-weighted improvement activity for the Merit-Based Incentive Payment System (MIPS).

You may attest to the COVID-19 Clinical Trial (IA_ERP_3) improvement activity if you treat patients diagnosed with COVID-19 and report their data to a Qualified Clinical Data Registry (QCDR), such as the IRIS Registry.

For a detailed description of the measure, go to aao.org/medicare/improvement-activities or check your IRIS Registry dashboard.

Serve as a Meeting Ambassador

Do you enjoy connecting with ophthalmologists from around the world? Become a Meeting Ambassador and help orient and engage international members who are attending the Academy annual meeting for the first time. The Meeting Ambassadors Program is designed to make AAO 2020 more approachable, foster inclusion, and build connections between first-time attendees and those who have attended past meetings.

Ambassadors are required to email or video chat with their international buddy at least once before AAO 2020. Onsite, Ambassadors must meet their buddy in person to provide guidance on navigating the conference and taking advantage of its offerings.

To sign up, visit aao.org/volunteer and select “Serve as a Meeting Ambassador to an International First-Time Annual Meeting Attendee” under “Connect” and submit an interest form by Sept. 13.

Follow @AAOjournal for the Latest Articles

Use Twitter to stay up to date on new research, including the latest on COVID-19, from *Ophthalmology*, *Ophthalmology Retina*, and *Ophthalmology Glaucoma*. Content is posted daily and includes articles in press, “Pictures & Perspectives,” editorials, and new issue alerts.

Follow @AAOjournal at twitter.com/AAOjournal.



MEETING AMBASSADOR. Roopinder Grewal, MD, of the United States (right) helps Alia Arianti, MD, of Indonesia (left) navigate her first annual meeting.



Ask the Ethicist: Responsibilities for Informed Consent Discussion

Q: Can my staff members participate in the informed consent discussion and even get the patient's signature?

A: Your staff may participate in the informed consent process, and they may be ideally suited to do so, especially if they have an existing rapport with patients. Patients may be more comfortable asking questions of a staff member than the physician. Remember, informed consent occurs before the patient signs the form, so be sure that the patient has ample opportunity to ask questions.

Staff members may also obtain the patient's signature. First, though, you must personally confirm the patient's understanding of the risks, benefits, and alternatives to the proposed procedure and ensure that all the patient's questions have been answered to the best of your ability. This kind of personal communication increases patient trust in you as a physician, which can be helpful for patient compliance and for avoiding legal claims. As stated in the Code of Ethics, Rule 2, “The operating ophthalmologist must personally confirm with the patient or patient surrogate their (his or her) comprehension . . . of the information that was discussed.

If staff are involved in any part of the informed consent process, you may wish to document in the patient record all participants in this process.

For more information, visit aao.org/ethics-detail/code-of-ethics and scroll down to “Informed Consent.” To submit a question, contact the Ethics Committee at ethics@aao.org.

ACADEMY RESOURCES

Submit Your Practice Management Benchmarking Data by July 31

The Academy, in conjunction with the AAOE, provides a benchmarking tool called AcadeMetrics.

Use up to 78 practice management benchmarks. Get a better understanding of your practice's strengths and weaknesses. Compare your financial and patient flow indicators against those of similar practices.

To access the benchmarks, you must first share your data. If you complete at least 50% of this year's survey, you'll be able to use AcadeMetrics' detailed, comparative reports.

What does it cost? AcadeMetrics is free for both Academy and AAOE members.

If you submit your benchmark data by July 31, you will be included in a drawing for a \$200 gift card. However, because of this year's pandemic, the deadline for data submission has been extended from July 31 to Sept. 30.

D.C. REPORT

Safeguarding Eye Care's Interests During the COVID-19 Crisis

Since the outset of the COVID-19 crisis, the Academy's D.C. office has been in constant communication with legislators and their staff, as well as with regulators. The goal has been to educate federal decision-makers about what needs to be done in the short, medium, and long term to maintain quality provision of eye care. And the contributions of physician advocates have been critical in that effort (see page 51).

Get the latest news out of D.C. Each Thursday, check your email for *Washington Report Express*.

Become a physician advocate. The Academy can help you to develop a relationship with your lawmakers. Start by going to aao.org/volunteering and click "Advocate" and "Be a Congressional Advocate."

New to AcadeMetrics? New practices can register at academetrics.aao.org/academetrics_signup.aspx.

Already using AcadeMetrics? Past AcadeMetrics Survey participants don't need to sign up again; they can use the same login that they used in previous years at academetrics.aao.org/.

For more information, visit aao.org/practice-management/analytics.

Educate Your Patients With Academy Online Videos

Offer information about cataract, retina, glaucoma, pediatrics, or ophthalmoplastics procedures on your patient portal or practice website. Patients can view the videos as many times as they like, thus improving their satisfaction and saving valuable clinic time.

Buy the videos at aao.org/store.

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- Cyclopentolate / Tropicamide / Phenylephrine
- Tropicamide / Phenylephrine

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