



Technology-based Eye Care Services in the Department of Veterans Affairs

ISSUE SUMMARY

The American Academy of Ophthalmology works closely with ophthalmologists who work for the Department of Veterans Affairs to ensure that veterans receive high-quality eye care services. The ophthalmologists at the Atlanta VA Medical Center (VAMC) have developed an innovative tele-eye program, Technology-based Eye Care Services (TECS), to expand access to basic eye care services for veterans, especially in rural areas, who may not have access to specialty eye services. Building on the success of the program at the Atlanta VAMC, the VA is now operating the TECS program at veterans' health care facilities in Illinois, Nebraska and South Carolina. Facilities in California, Wyoming, Kansas, Michigan, Montana and Texas have also expressed interest in bringing the TECS program to their state.

The American Optometric Association (AOA) is working to derail the program by soliciting congressional opposition to the program. In fact, AOA members will be visiting with their members of Congress shortly after the Academy's Congressional Advocacy Day. We anticipate that they may be urging members of Congress to oppose the program during their Hill meetings. The Academy would like to ensure that congressional offices are educated on the benefits the TECS program is bringing to our nation's veterans.

BACKGROUND INFORMATION ON TECS PROGRAM

The TECS program was developed at the Atlanta VAMC and is a clinical care initiative funded primarily through the VA Office of Rural Health (ORH). The program is designed to improve access to basic eye care services which results in the earlier diagnosis and treatment of eye disease. Through the TECS program, veterans in rural areas who are utilizing a community-based outpatient clinic (CBOC) for primary care are now able to receive an accurate vision check, as well as critical eye-disease screening as part of their local primary care visit. Veterans who need follow-up care can see an eye care provider at a VAMC or a local provider in the community.

The TECS program uses state of the art ophthalmic equipment, the VA's secured IT infrastructure, trained ophthalmology technicians (many COA/COT certified) and VA-credentialed ophthalmologists and optometrists at the CBOC and VAMC locations. There are strict, evidence-based protocols in place, and all patient care decisions are made by board-certified eye providers. An independent data analysis team is tracking and analyzing multiple quality metrics of the TECS program to ensure the delivery of high-quality care that is safe for patients.

When the program first began, about 20 percent of the TECS participants had not seen an eye care provider in over five years. As more veterans continue to be seen through the TECS program, the percentage has decreased to five percent. Roughly eight percent of veterans screened have been found to have a previously undiagnosed serious eye disease. While the TECS screening focuses on the four most common eye conditions that cause vision loss or blindness (glaucoma, cataracts, macular degeneration and diabetic retinopathy), other serious eye conditions have been detected through the screening. For example, TECS has also diagnosed retinal detachments, swollen nerves, lid lesions, dislocated lenses and possible stroke in the eye. The TECS program disease detection rate is on par with the Atlanta VAMC's prevalence of eye disease detected through face-to-face, routine eye exams. Roughly 30 percent of the veterans screened are referred for additional follow up care and the importance of follow up care, if needed, is emphasized to the veterans participating in the program.

The majority of patients (98 percent) are seen within 30 days of contacting the clinic and many are seen as walk-in patients or on the same day as another appointment at their CBOC. Patient satisfaction scores for the program are high with 99.6 percent of patients stating they “*strongly agree*” that the ‘clinic provided me with high-quality service’ and 98 percent “*definitely would*” ‘recommend the clinic to others’.

The Academy strongly believes that the TECS program is a valuable tool for extending eye care services to veterans, especially those in rural areas who may not have ready access to these critical services. The Academy has strong concerns that without the TECS program, many veterans with serious eye disease might not be diagnosed and receive the care they needed in a timely manner.

MYTHS AND FACTS ABOUT THE TECS PROGRAM

Here are some of the arguments that AOA uses to criticize the TECS program.

Myth: The TECS program is an experimental program.

Fact: The TECS program is not an experimental program.

- TECS is based on the highly successful, pre-existing VA diabetic tele-retinal imaging screening program that has been operating nationwide since 2006.
- This innovative program adds multiple additional clinical measurements, such as visual acuity and eye pressure to diabetic tele-retinal photographs and was carefully developed based on published literature and Academy preferred practice patterns.
- It uses the same equipment that is used daily in optometric and ophthalmology offices.
- The protocol was formally tested in a pilot study before widespread implementation. Strict, evidence-based protocols are in place and all patient care decisions are made by board-certified optometrists and ophthalmologists.
- An independent group at the VA’s Health Science Center of Innovation in Charleston, South Carolina is tracking and analyzing multiple quality metrics of the TECS program to ensure patients are receiving high-quality care through the program.

Myth: Veterans do not know that they aren’t receiving a comprehensive eye exam.

Fact: Veterans are informed that they are receiving a screening eye exam prior to being seen through the TECS program.

- Veterans receive a brochure which explicitly states: “It is important to note that this a screening exam and is **not** meant to replace a dilated exam by an eye care provider.”
- No veteran is forced to be seen through the TECS program. Veterans are given the option of scheduling an in-person exam with an eye care provider at the VAMC or a local non-VA provider through the VA’s Community Care program.

Myth: Glasses prescribed through the TECS program only use auto-refraction, a substandard method for veterans, resulting in errors and inaccuracies.

Fact: During a TECS screening exam, a highly trained ophthalmic technician performs an eyeglasses check the same way it is performed during an in-person visit at the VAMC Eye Clinic.

- Eyeglass prescriptions are measured using the same equipment and methods as in-person optometry and ophthalmology office visits. All TECS sites have trial frames

and lenses and all technicians are trained to use this equipment to measure eyeglass prescriptions for both distance and near vision.

- Utilizing technicians to measure for glasses is the standard of care in many ophthalmology clinics, in and outside the VA.
- The prescription is reviewed by a board-certified eye provider before being given to the patient.
- The detailed TECS protocol ensures that patients with high refractive errors, high astigmatism or a best-corrected vision that falls short of the TECS protocol threshold have an in-person exam.
- The TECS program tracks eyeglass remake rates as one of its quality measures. Data shows that the accuracy rates for eyeglasses measured through the TECS program are equal to the accuracy rates for eyeglasses measured during an in-person exam.

WHAT TO TELL CONGRESS

- The VA TECS program is an innovative program that is expanding access to basic eye care services for veterans, especially in rural areas.
- The program receives high patient satisfaction scores from veterans who have participated in it.
- The program is resulting in the earlier diagnosis and treatment of serious eye disease.
- Without the TECS program, many veterans with serious eye disease might not have been diagnosed and received the care they needed in a timely manner.
- Innovations like TECS are utilized by other first world countries like Canada and the United Kingdom to help them provide high-quality, cost-effective care to all their citizens. These tele-eye innovations could be expanded to help other Americans outside the VA.