

Academy Notebook

NEWS • TIPS • RESOURCES

WHAT'S HAPPENING

State Societies Honored During AAO 2021

The Academy Secretariat for State Affairs recognized two societies with its 2021 Star Award at the Nov. 15 State Society Presidents' Breakfast & Recognition Awards during AAO 2021. The Star Award program provides special recognition to state ophthalmology societies for outstanding efforts on programs or projects they have implemented in the previous year. The winning societies are:

Kentucky Academy of Eye Physicians and Surgeons for its KAEPS Annual Meeting. In response to member demand, they organized and held a smaller scale in-person annual meeting in August 2020. With input from members and following local social distancing and safety guidelines, they held a successful and profitable meeting—providing value to members and ending the first year of the pandemic with a budget surplus.

Maryland Society of the Eye Physicians and Surgeons for its MSEPS Webinar Series program. The society held a series of five educational webinars from June to August 2020, in an effort to make up for CME lost from their canceled in-person conference. They focused on providing relevant and interesting content to members and



STAR AWARDS. The Kentucky Academy of Eye Physicians and Surgeons (KAEPS) was awarded a 2021 State Affairs Star Award during AAO 2021 for its KAEPS Annual Meeting. From left to right: **John D. Peters, MD**, Academy secretary for state affairs; **Elizabeth G. Roach**, KAEPS executive director; and **William W. Richardson, MD**, KAEPS president.

sought volunteers from among their board members to lend their expertise as speakers. Through this program, the Maryland society engaged a large number of ophthalmologists who had never been members of the society, and it secured 19 new members for 2020.

Since the Star Award program's inception in 2001, the Secretariat for State Affairs has recognized 69 state ophthalmology society programs. Apply for the awards by responding to the Secretariat for State Affairs' annual organizational survey of state societies.

State Society Executive Directors Recognized for Outstanding Contributions

Each year, the Academy Secretariat for State Affairs publicly acknowledges state ophthalmology society executive

directors for their contributions to their state societies and for their partnership and collaboration with the Academy on its national efforts. During AAO 2021 in New Orleans, the Secretariat recognized executives of two state ophthalmology societies for their exemplary work.

2021 Outstanding Executive Director: Political Action—**Rachael Reed**, Executive Director, Texas Ophthalmological Association (TOA). She was recognized for her efforts in preserving quality surgical eye care in Texas by marshaling society leadership, grassroots resources, and coalition partners to oppose optometric surgery legislation. She also worked tirelessly to ensure her physician leaders were superbly prepared and briefed for testimony, establishing a model for other states.



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2021 Outstanding Executive Director: Organizational Development— Colleen Filbert, Executive Director, Florida Society of Ophthalmology (FSO). She was recognized for her efforts to maintain and improve the organizational strength of FSO, ably leading the society through the challenges of the pandemic while working to maintain membership, provide value to members via virtual and in-person educational meetings, and address challenges on the legislative front.

The Academy Secretary for State Affairs, **John D. Peters, MD**, praised the efforts of all executive directors on behalf of state societies and ophthalmologists across the country. “State society executive directors are the backbone of ophthalmology’s team. Our state society executive directors are as dedicated as their ophthalmologist members to serving our profession and preserving quality eye care for our patients. Despite the stresses of the COVID-19 pandemic, they have worked tirelessly to maintain our organizations and keep their members engaged. We in State Affairs thank them for all that they have given and continue to give to our state ophthalmology societies.”

Find an ophthalmological society in your state at aao.org/statesocieties.

FOR THE RECORD

Congratulations to Life Fellows/Members

The Academy is pleased to congratulate members who have achieved the status of Life Fellow/Member in 2022. The Academy commends them for their dedication to lifelong learning and advancing standards of care over their 35 years of membership and deeply appreciates their loyalty and longstanding support.

For the full list, view this article at aao.org/eyenet.

Election Results

On Nov. 15, 2021, voting opened for five positions on the 2022 Board of Trustees and amendments to the Code of Ethics. The results were posted on AAO.org and in the online version of *EyeNet* after Dec. 16.

For more information about the elections, visit aao.org/about/governance/elections.

Nominations for the Academy Board

BY TAMARA R. FOUNTAIN, MD

As past president of the Academy, it is my privilege to serve as Chair of the Academy’s Nominating Committee in 2022. This committee represents a variety of interests within the Academy and is charged with identifying appropriate candidates for the open positions on the 2023 Board of Trustees.

The committee is interested in identifying leaders in our profession who have experience in confronting the critical issues facing organized medicine and reflect the strength and diversity of our members. The Academy’s leaders should be knowledgeable, experienced, and prepared to devote the time and energy required by a large organization in these challenging times. This work is both demanding and rewarding for those interested in helping to assure the Academy’s success and responsiveness to members. With these characteristics in mind, I ask you to assist the committee by suggesting appropriate candidates for the following positions in 2023:

President-elect (to serve as President in 2024). Nominees should have leadership experience within the Academy as well as demonstrated leadership qualities in clinical practice, in their

own ophthalmic communities, and in other medical or ophthalmological organizations.

Senior Secretary for Ophthalmic Practice (three-year term). This senior secretary coordinates the programs and activities relating to the management and practice of ophthalmology. Ravi D. Goel, MD, is currently serving the third year of his term and is eligible for a second term.

Secretary for Annual Meeting (three-year term). This secretary is responsible for all Academy programs at the annual meeting and Subspecialty Day.

Trustee-at-Large (four-year term). This individual should be an Academy Fellow who demonstrates strong leadership potential and would be able to represent and articulate the needs and concerns of the membership to the Academy board.

Public Trustee (a renewable three-year appointment). The Bylaws allow the board to appoint up to three public trustees. A public trustee is an advisor to and member of the Board of Trustees. Public trustees provide insight on how ophthalmology can better work with the rest of medicine, the public, government, and industry. The nominating committee will be pleased to receive suggestions for individuals who may be physicians from other medical specialties or leaders in industry, government, public policy, or advocacy. Currently the board is served by David

ABOUT THE NOMINATING COMMITTEE

The Academy nominating process has been carefully crafted to be inclusive, fair, and efficient. This process encourages a broad base of nominations from the entire Academy membership. The Nominating Committee composition is delineated by the Bylaws, and it considers a number of factors when screening potential candidates, including integrity, ophthalmology leadership ability, special expertise, past committee and leadership experience and performance, and knowledge and interest in the multitude of issues currently faced by ophthalmologists. In addition to nominations from the current year, the committee reviews prior year nominations to ensure a wide range of potential candidates for each position. Following months of confidential deliberations, the committee presents final recommendations to the Board of Trustees for approval. This single candidate method avoids the loss of valuable future leaders, as there are no public “losers” in the election. Often those considered but not selected for an open position one year become the nominee of choice in a future year.

C. Herman, MD, James A. Lawrence, and Paul B. Ginsburg, PhD, who are all serving the third year of their three-year terms and are eligible for another term.

Thank you for your interest and participation in this process. Membership participation is vital, not only for the Academy but also for our collective goals of being able to provide appropriate, accessible, and affordable eye care to the public. On behalf of the Nominating Committee, I look forward to receiving your suggestions as we seek to identify our profession's future leaders.

Send your confidential suggestions by Jan. 31 to Tamara R. Fountain, MD; Nominating Committee Chair, American Academy of Ophthalmology, P.O. Box 7424, San Francisco, CA 94120-7424. Suggestions can also be e-mailed to nominate@aao.org or faxed to 415-561-8526.

For more information, visit aao.org/about/governance/board-nominations.

TAKE NOTICE

Kantar Notice: A Request From EyeNet

In the next month or two, some of you may be invited to participate in a magazine readership survey conducted by Kantar Media. If you are a fan of *EyeNet*, please participate. Being ranked among the most widely and thoroughly read ophthalmic publications enables the magazine to secure funding for projects that help you in the clinical realm and in your practice, like the MIPS manual.

Honor Your Colleagues

To recognize the achievements of ophthalmologists who have made important contributions to ophthalmology, the Academy would like your help in nominating recipients for the following awards:

Laureate Recognition Award. This award honors an outstanding ophthalmologist whose significant contributions to the field have shaped modern ophthalmology. The Academy is accepting nominations through Jan. 31 for the 2022 award. Nomination forms are

D.C. REPORT

Is It Time for Physician Payment Reform Again?

Physicians are facing annual threats of major cuts—seven years into the law that was supposed to end recurring, across-the-board Medicare payment cuts. This time, the threat of annual cuts collided with recovery from an ongoing pandemic.

Physicians can't afford another decade of the payment purgatory that ended with the 2015 repeal of the Medicare Sustainable Growth Rate (SGR). Created by Congress in 1997, CMS used the SGR to control spending by Medicare on physician services. Under the formula, if overall physician costs for the previous year exceeded target expenditures, it triggered annual across-the-board reduction in physician payments that Congress had to intervene to stop.

In just a few years, physicians have gone from small annual updates under the new Medicare Access and CHIP Reauthorization Act (MACRA) to the threat of double-digit payment cuts in 2021 and 2022 due to the implementation of evaluation and management policy and other budget neutral changes under the physician fee schedule. In addition, vigorous lobbying averted nearly double-digit cuts, which were due in part to Congress triggering balanced budget rules—known as PAYGO or the Pay-As-You-Go Act of 2010—when it passed the last COVID-19 relief bill.

The 2015 MACRA law, which established the Quality Payment Program and the Merit-Based Incentive Payments System (MIPS), tried to achieve a goal of payment stability for physicians, but it is not succeeding. The promised bonuses never materialized, and upcoming penalties are significant. Expiration of annual updates comes as specialties are experiencing payment turbulence due to “budget neutrality,” where improved payments for office visits and updated labor costs are resulting in cuts to surgery.

Furthermore, Medicare has yet to establish new payment models that can engage and benefit most surgical specialties. It's time to come back to the table on Medicare physician payment.

The Academy, the American Medical Association, and partner organizations recommend that Congress prioritize seven principles:

- Reduce administrative burdens. A simple, relevant, and predictable payment system benefits physicians, patients, and CMS itself.
- Reward value to patients. Too often, CMS has required or incentivized data entry that has no meaningful effect on quality of care.
- Leverage the power of clinical data registries. The Academy's IRIS Registry can provide a more meaningful way to improve patient care than many program requirements implemented by CMS.
- Encourage innovation. Support the adoption of more high-value services that CMS has not traditionally covered.
- Provide financial stability. Constantly changing reimbursement rates sap time and energy that are better spent caring for patients.
- Support the health care system's diverse set of practices. The payment system needs to empower all practice types, including rural, urban, small, and solo; not just large ones.
- Encourage competition rather than consolidation. Physicians shouldn't have to give up their private practices due to burnout.

This framework aims to provide more payment predictability in the Medicare system. The Academy will continue to seek congressional intervention to stop payment cuts and to devise long-term solutions.

To share your thoughts, email the Academy at healthpolicy@aao.org.

available at aao.org/about/awards/laureate#nominations.

Outstanding Humanitarian Service Award. This award recognizes Academy members for contributions in charitable activities, care of the indigent, and community service performed above and beyond the typical duties of an ophthalmologist. The Academy is accepting nominations through March 11 for the 2022 award. Nomination forms are available at aao.org/about/awards/humanitarian#nominations.

MIPS: If You Are Reporting Manually Via the IRIS Registry—Get Busy!

If you report MIPS via the IRIS Registry and are not taking advantage of the COVID-related exclusion that CMS announced on Nov. 10, make sure you complete the following steps by Jan. 31.

Step 1: Download the IRIS Registry Preparation Kit. The kit includes step-by-step instructions for inputting and viewing your MIPS data. Academy members can download it for free (aao.org/iris-registry) or purchase it as a spiral-bound book (aao.org/store).

Step 2: Finish manual reporting for 2021. If you successfully integrated your electronic health record system with the IRIS Registry, your MIPS quality data are automatically extracted. If not, you must enter quality data into the IRIS Registry manually. In both cases, promoting interoperability measures and improvement activities can only be reported manually.

Include the data-completeness totals. If you are manually reporting patients for a quality measure, you must enter into the IRIS Registry the total number of patients eligible and excepted from that measure.

If you report a quality measure on fewer than 100% of patients, do not cherry-pick. CMS has stated that if you report on a measure for less than 100% of applicable patients, you should not select patients with the goal of boosting your performance rate.

Step 3: Make sure membership dues are current. All your practice's ophthalmologists must be up to date with their 2021 Academy membership dues.

Step 4: Submit a signed data-

release consent form. You must submit a new consent form (or forms) each year and can do so via the IRIS Registry dashboard. For instructions, see aao.org/consent-form.

Step 5: Submit your data to CMS. Log into the IRIS Registry dashboard and complete the submission process.

For more information on the IRIS Registry, visit aao.org/iris-registry.

You Can Help Diversify Ophthalmology

The Academy Foundation is ringing in the new year with a fundraising campaign for the Minority Ophthalmology Mentoring program. Though minorities make up nearly a third of the U.S. population, they account for only about 6% of practicing ophthalmologists. Heading into its fifth year, the program aims to increase diversity in the field of ophthalmology. This diversity increases the reach of patient care, since many patients are more comfortable interacting with physicians in their cultural or language groups. You can help students who are underrepresented in medicine by donating to the Minority Ophthalmology Mentoring program.

Visit aao.org/donate today.

Include the Museum of the Eye in Your 2022 Travel Plans

The Truhlsen-Marmor Museum of the Eye opened a new physical space at Academy headquarters last summer. As COVID restrictions ease, the museum is expanding its programs to provide fascinating experiences for Academy members and the public. Put San Francisco on your list for spring break or summer and bring the whole family to enjoy this free resource that the Academy's generous member and corporate donors helped create.

In the meantime, you can download the Museum of the Eye app for a virtual visit and sign up for the quarterly newsletter.

Learn more at aao.org/museum.

Academy Year in Review

For many Academy members, 2021 was a year of learning how to conquer coronavirus obstacles to envision a new future. It was also a year to reconnect

with colleagues, friends, and family. Read the 2021 Year in Review to learn about the Academy's many achievements, including:

- Celebrated the Academy's 125th anniversary,
- opened the Truhlsen-Marmor Museum of the Eye to the public,
- returned to a live, reimagined annual meeting,
- launched the Academy's first gold open access online journal, *Ophthalmology Science*, and
- doubled the cohort size of the Minority Ophthalmology Mentoring program for the second year in a row.

Learn about these and other successes at aao.org/yearinreview.

Volunteer: Write for "Ask an Ophthalmologist"

Are you passionate about patient education? Write for "Ask an Ophthalmologist," a feature in the EyeSmart section of AAO.org that allows the public to submit questions about eye conditions and treatments for a response from an ophthalmologist. The clinical responders are responsible for drafting answers to questions in their area of subspecialty, which are sent to them periodically by the Patient Education staff. Responses must be written in language appropriate for the general public.

Get started at aao.org/volunteering, then choose "Write." (This is just one of many Academy volunteer opportunities.)

OMIC Tip: Continuing/Discontinuing Mask Requirements

OMIC continues to receive questions about COVID-related topics. Issues evolve as the virus does, presenting both clinical and administrative challenges to health care providers. One of the most common considerations is whether practices should continue requiring masks, even if the state or other authorities have lifted requirements.

Requiring masks. You can decide to adopt rules that are stricter than local, state, and federal rules.

If you require individuals to wear masks, be sure to do the following:

Provide patients with advance

notice of your policy so they know what to expect. You can do this at the time they make an appointment, when you send reminders, and by adding a message on your website.

Emphasize that your policy is to protect patients and the practice, and that you are following the CDC's guidance for health care settings.

Practices manage mask requirements differently:

- Some require masks in the waiting area but allow for removal of masks in the exam room.
- Some require masks in both the waiting room and the exam room.

Removing the mask requirement. If you're considering removing the mask requirement for patients, visitors, and staff, it should be for reasons that promote the safety of all.

Check your state and local health departments to confirm that their recommendations for optional mask use apply to health care settings (i.e., not just to other businesses).

If your state and county health departments allow health care settings discretion with mask requirements, you should evaluate public health data (e.g., rate of vaccinations; new COVID-19 infections, hospitalizations, and deaths in your area) in deciding whether removing the requirement is currently safe.

If you remove the mask requirement:

- Be diligent with other infection control and prevention measures (e.g., cleaning, barriers).
- Have a plan for patients who may still want or need to wear masks, even if they've been vaccinated (e.g., preference or immunocompromised).
- Give patients advance notice that you are no longer requiring patients to wear masks, and instruct them to wear a mask if they feel they need to do so.
- Reassure patients that staff and physicians will continue to wear masks.

For more tips on creating COVID-related policies, including requiring proof of vaccination for employees or patients, you can visit www.omic.com/covid-19-current-questions-and-risk-management-recommendations.

ACADEMY RESOURCES

Join AAOE and Empower Your Practice

The American Academy of Ophthalmic Executives (AAOE), the Academy's practice management affiliate, is your best source for practice management solutions. AAOE membership unlocks a host of valuable benefits, including:

- on-the-ground tips and strategies from The Resilient Practice: Positioning the Practice for Success module and the weekly Practice Management Express e-newsletter;
- real-time crowdsourced support and advice through the new and improved community platform, AAOE-Talk;
- strategic business intelligence from Academy experts; and
- members-only coding and practice management resources.

Academy members-in-training and members in their first year of practice receive complimentary membership.

See how AAOE membership supports your practice's success at aao.org/member-services/join-aaoe.

Visit the New Pediatric Practice Management Page

The Academy recently launched a Practice Management webpage specifically devoted to pediatric ophthalmology. You can visit to find trusted resources for vital coding and practice management unique to the pediatric practice. All content is curated to provide current and relevant information as your practice evolves over the next decade.

Explore it now at aao.org/practice-management/coding/pediatrics.

Don't Miss the 2022 Pediatric Ophthalmology and Strabismus Webinar

On Jan. 13, from 8:30-9:30 p.m. EST, join Kartik S. Kumar, MD, who will moderate the 2022 Update on Pediatric Ophthalmology and Strabismus (1.5 CME). Featuring Ed Wilson, MD, the webinar will cover premium IOLs for

children and new treatments for vernal keratoconjunctivitis.

Learn more at aao.org/clinical-webinar.

MEETING MATTERS

Plan to Attend AAO 2022

Mark your calendar for AAO 2022. It takes place from Sept. 30 to Oct. 3 (with Subspecialty Day meetings beginning on Friday, Sept. 30) at McCormick Place in Chicago.

Visit aao.org/2022 for details.



AAO 2022. This year's annual meeting will take place Sept. 30-Oct. 3 in Chicago.

The 2022 Abstract Deadline Is Jan. 11

Create content for AAO 2022. Submit an Academy or AAOE instruction course or a new Skills Transfer lab abstract by Jan. 11.

Learn more at aao.org/presenter-central.

Claim CME Through Aug. 1

AAO 2021. For AAO 2021, you can claim CME credit multiple times for attending the live meeting and for viewing sessions in the virtual meeting, up to the 50-credit maximum, through Aug. 1, 2022. You can claim some in 2021 and some in 2022, or all in the same year.

Subspecialty Day. For 2021 Subspecialty Day, you can claim CME credit multiple times for attending the live meeting and for viewing sessions in the virtual meeting, up to the 12-credit maximum per day, through Aug. 1, 2022. You can claim some in 2021 and some in 2022, or all in the same year.

For more information, visit aao.org/annual-meeting/cme-information.