# Academy Notebook

NEWS • TIPS • RESOURCES

#### WHAT'S HAPPENING

### State Societies Honored During AAO 2019

The Academy Secretariat for State Affairs recognized two societies with its 2019 Star Award at the Oct. 14 State Society Presidents' Breakfast & Recognition Awards during AAO 2019. 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:

Illinois Society of Eye Physicians and Surgeons for its Patients as Advocates for Safe Surgery project. The society successfully engaged patients as advocates in their ongoing effort to preserve quality eye care in Illinois.

Texas Ophthalmological Association for its Safe Vision Texas Coalition—The Right Eyecare for All Texans. The society established and mobilized a coalition of patients and physicians in support of efforts to ensure all Texans receive the right eye care by the right professional.

Since the Star Award program's inception in 2001, the Secretariat for State Affairs has recognized 69 state ophthalmology society programs with the award. State ophthalmology societies may apply for this award by respond-





STAR AWARDS. The Texas Ophthalmological Association (TOA) was awarded a 2019 State Affairs Star Award during AAO 2019 for its Safe Vision Texas Coalition—The Right Eyecare for All Texans. From left to right: Sidney K. Gicheru, MD, past TOA president (2014-2015); Jeremiah Brown, MD; John M. Haley, MD, past TOA president (2017-2018); Robert D. Gross MD, Academy councilor for TOA; Rachael Reed, CAE, TOA executive director; Mark J. Gallardo, MD, TOA president; and Kurt F. Heitman, MD, Academy Secretary for State Affairs.

ing to the Secretariat for State Affairs' annual organizational survey of state societies, which goes out in late spring or early summer.

#### 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 2019 in San Francisco, the Secretariat recognized executives of two state ophthalmology societies for their exemplary work.

2019 Outstanding Executive Director: Organizational Development—

Maura Campbell, Executive Director, Michigan Society of Eye Physicians and Surgeons (MiSEPS), for her efforts to improve the organizational strength of MiSEPS, notably leading the society's rebranding efforts, which included developing a strategic communications plan and launching a new society web site

2019 Outstanding Executive Director: Political Action—Sheila Bush, Executive Director, Wyoming Ophthalmological Society (WOS), for orchestrating the efforts of the WOS to defeat optometric surgery legislation.

The Academy Secretary for State Affairs, Kurt F. Heitman, MD, praised the efforts of all executive directors on behalf of state societies and ophthalmologists across the country. "State society executive directors are vital members of ophthalmology's team who are committed to serving our profession and our patients. We in State Affairs appreciate their expertise, respect their dedication to preserving quality eye care, and value their partnership in addressing the needs of our members."

#### TAKE NOTICE

### Nominate a Colleague for the Laureate Award

Every year, ophthalmologists distinguish themselves and the profession by making exceptional scientific contributions toward preventing blindness and restoring sight worldwide. The Academy Board of Trustees will recognize these extraordinary contributions with its Laureate Award, the Academy's single highest honor. The award recipient is announced each fall, and the Laureate is recognized during the Opening Session of the annual meeting.

**Nominate a colleague** using the application at aao.org/laureate by Jan. 31, 2020.

#### Submit Your Research to Ophthalmology

Ophthalmology is the flagship journal of the Academy. With a 7.7 Impact Factor and a print circulation of 27,000 subscribers, you can reach a broad audience. Submit your research today!

**Submit a manuscript** at www.edito rialmanager.com/ophtha.

### MIPS: Dec. 31 Deadline for EHR Hardship Exceptions

In the Merit-Based Incentive Payment System (MIPS), the performance category that reports use of electronic health records (EHR) is called promoting interoperability (PI). It is one of four MIPS performance categories and contributes up to 25 points to your MIPS final score (0-100 points). Under normal circumstances, when you report no PI measures, your PI score is zero and your maximum MIPS final score is 75 points.

The significant hardship exception. However, you can apply to be exempted from PI if you are facing a significant hardship—for example, losing access to your EHR system because of extreme



HOLIDAY GIVING. Make a gift to the Academy Foundation in honor or memory of a mentor, colleague, or family member. Your funds will support Academy programs, including the Truhlsen-Marmor Museum of the Eye. Make your gift by Dec. 31 to receive the tax deduction for 2019. Donate at aao.org/foundation/giving-options.

circumstances that are beyond your control, such as a fire, severe financial distress, or vendor issues.

If the Centers for Medicare & Medicaid Services (CMS) accepts your application for a hardship exception, PI's contribution to your final score will be reweighted to zero, and the quality performance category's contribution will be reweighted upward; thus, you could still earn the maximum MIPS final score of 100 points despite not reporting PI measures.

Special consideration given to small practices. If small practices can demonstrate that obtaining and maintaining certified EHR technology would cause undue hardship, CMS may grant them a PI hardship exception.

**Submit your application by Dec. 31, 2019.** For guidance on submitting this application and examples of significant hardships, see aao.org/medicare/pro moting-interoperability/exceptions.

MIPS: Your EHR Must Be 2015-Certified by Dec. 31 Check your electronic health record (EHR) system's certification. To check whether your EHR system is a 2015-edition CEHRT, visit https://chpl.healthit.gov/#/search.

Your EHR certification impacts how you report quality. If your EHR system doesn't have 2015-edition certification by the end of the year, the IRIS Registry *may* still be able to extract quality measure data from your EHR. However, your scores would be based on the measure benchmarks used for manual reporting, many of which are subject to significant scoring limitations, and you would not be able to claim the bonus for end-to-end electronic reporting. You also would be able to report only measures that are available for manual. reporting, which means you would not be able to report measure 318: Falls: Screening for Future Fall Risk.

What about promoting interoperability (PI)? Having 2015-edition functionality throughout your PI performance period and having 2015-edition certification by the end of your performance period are prerequisites for PI reporting. If your EHR vendor isn't able to provide you with both, apply for a hardship exception (see this page).

### MIPS: Jan. 31 Deadline for IRIS Registry Reporting

**Don't wait until the last minute.** By Jan. 31, 2020, those who use the IRIS Registry for MIPS reporting will need to do the following:

1. Finish manual reporting for 2019. This includes quality measures, promoting interoperability (PI) measures, and improvement activities. When manually reporting data for quality measures, you can either enter patients one at time or enter them as a batch via a properly formatted CSV file. If you successfully integrated your EHR with the IRIS Registry, your MIPS quality data are automatically extracted, but you can only report PI measures and improvement activities manually.

Include the data-completeness totals. If you are manually reporting patients for a quality measure, you must submit to 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. When you submit your MIPS quality data to CMS, you must

certify that, to the best of your knowledge, your data is "true, accurate, and complete." In the Aug. 14, 2019, edition of the *Federal Register*, CMS clarified that if you report on a measure for fewer than 100% of applicable patients, you should not select patients with the goal of boosting your performance rate; the agency states that such "cherry-picking" would result in data that is not "true, accurate, and complete."

2. Submit a signed data-release consent form. The IRIS Registry won't submit a provider's MIPS data to CMS unless it has received the signed consent form. Providers who are reporting as individuals should sign their own consent forms; providers who are reporting as a group can be included on a single consent form, which can be signed by the administrator. All your practice's ophthalmologists must be up to date with their 2019 Academy membership dues. You must submit a new consent form each year and can do so via the IRIS Registry dashboard. For instructions, see aao.org/consent-form.

Learn more about the IRIS Registry and MIPS at aao.org/iris-registry and aao.org/medicare.

#### **ACADEMY RESOURCES**

#### View the Latest Guidelines

The Academy's *Ophthalmic Technology Assessments* evaluate new and existing procedures, drugs, and diagnostic and screening tests for safety and clinical effectiveness. Review the current assessments:

- The Effect of Anti-Vascular Endothelial Growth Factor Agents on Intraocular Pressure and Glaucoma,
- Use of Orthokeratology for the Prevention of Myopic Progression in Children, and
- Intraocular Lens Implantation During Early Childhood.

Find assessments at aao.org/ota.

#### Register Now for Ophthalmology's Most Important 2020 Coding Update

Start the new year by proactively protecting your patients and your practice. The Academy's 2020 Ophthalmology Coding Update, presented by David B.

D.C. REPORT

## CMS Finalizes ASC Burden-Reduction Strategy, Academy Nets Advocacy Win

The Centers for Medicare & Medicaid Services (CMS) is following through with a strong plan to eliminate obsolete administrative requirements, this time benefiting ambulatory surgery centers (ASCs) and their patients.

No pre-op exams requirement. The Academy in December 2018 urged CMS to drop the requirement for comprehensive preoperative physical examinations, which are irrelevant to eye surgery. In a final rule that takes effect in 2020, the agency eliminates this requirement, replacing it with one that offers ASCs greater flexibility to determine which patients and surgeries are low risk. The agency advanced this plan as part of its ongoing Patients Over Paperwork initiative, which strives to eliminate barriers between physicians and those seeking care.

The Academy endorsed this plan because it would allow ASCs to create their own policies for presurgical medical histories and physical examinations, including associated testing.

In its new policy, CMS is taking the following steps:

- It is finalizing the proposal to revise the comprehensive preoperative physical examinations requirement to state, "Significant medical history and results of physical examination, as applicable."
- It is finalizing the proposal to eliminate the requirement for each patient to have a medical history and physical assessment completed by a physician not more than 30 days before the scheduled surgery and replace it with the requirement for ASCs to develop and maintain a policy that identifies those patients who require a medical history and physical examination prior to surgery.
- It is revising current policy to clarify that the ASC rules must be based on nationally recognized standards of practice and guidelines and applicable state and local health and safety laws.

The policy is consistent with the Academy's Choosing Wisely initiative, by which the Academy supports eliminating preoperative medical tests for eye surgery unless there are specific medical indications. In fact, when issuing its draft rule, CMS cited cataract surgery and Nd:YAG capsulotomy among its primary motivators for this change.

No hospital arrangements requirement. CMS is also eliminating another requirement opposed by the Academy, which required facilities to either have a written transfer agreement with a hospital or ensure that all physicians have admitting privileges in a hospital. The agency has instead decided that it will require ASCs to periodically provide the local hospital with written notice of its operation and patient population served. Many ambulatory surgery center owners have told the Academy that it is difficult to secure these arrangements from hospitals. Lacking the transfer agreement or admitting privileges sometimes caused ASCs to fail Medicare's compliance requirements.

Glasser, MD, Academy Secretary for Federal Affairs, and Sue Vicchrilli, Academy Director of Coding and Reimbursement, will detail critical updates to the cataract/glaucoma combined procedure, the new family of extended ophthalmoscopy codes, the CCI

edits, and more. Plus, they will preview the new E&M guidelines for 2021. This recorded presentation is eligible for CME credit and will be available on Jan. 8, 2020.

**Preorder your access today** at aao. org/2020coding.

#### Attend the Ophthalmology Business Summit, March 14-15, 2020

The Academy's leadership-focused Ophthalmology Business Summit in Chicago offers the tools and tactics you need to nurture a thriving, successful ophthalmic practice. As shifting regulations and market forces continue to produce uncertainty, it's more important than ever to actively address the complex business challenges impacting your practice's health and viability. Physician leaders and senior administrators who attend as a team can take full advantage of the all-new curriculum.

Learn more and register at aao.org/business-summit.

### Get 10% Off Patient Education Brochures Until Dec. 31

Don't leave patients self-diagnosing with "Dr. Google." Send them home with easy-to-understand, ophthalmologist-reviewed brochures from the Academy to save time and mitigate risk. Now through Dec. 31, get 10% off when you use code PEB2019. No minimum purchase is required to take advantage of this time-limited offer.

**Order today** by visiting aao.org/patientbrochures.

#### **MEETING MATTERS**

#### 2020 Abstract Deadlines

Want to create content for AAO 2020 in Las Vegas? Submit your ideas for an instruction course or new Skills Transfer lab. Abstracts will be accepted from Dec. 12, 2019, through Jan. 14, 2020.

**Learn more** at aao.org/presenter central.

### Submit a 2020 Practice Management Course

Each year, the AAOE offers a wide range of new courses as part its practice management program that runs in parallel with the Academy's annual meeting. These sessions address current practice management challenges, coding issues, and more. Do you have a great idea for a course? Submit an instruction course abstract between Dec. 12, 2019, and Jan. 14, 2020.

**To submit,** visit aao.org/abstracts. **For more information,** contact Licia Wells, AAOE Program Manager, at lwells@aao.org.

#### Claim CME for AAO 2019

If you attended AAO 2019 and/or Subspecialty Day and your attendance was verified onsite in San Francisco, you should have received an email with a link and instructions for claiming CME credits online. You can claim credits (if you did not already do so at the meeting) and obtain transcripts that include AAO 2019/Subspecialty Day credits at CME Central. The Academy transcript will not list individual course attendance, only overall credits claimed.

**Claim credits** at aao.org/cmecentral. **For more information,** visit aao.org/annual-meeting/cme.

#### **View the Virtual Meeting**

The Virtual Meeting is a free online component of AAO 2019. View 18 archived sessions from San Francisco (approximately 25 hours of educational content) through Jan. 31, 2020. Access the Virtual Meeting with your Academy login and password. The AAO 2019 Virtual Meeting cannot be reported for CME credit.

**For more information,** visit aao.org/virtual-meeting.

#### Enjoy AAO 2019 All Year

AAO 2019 Meetings on Demand provides recorded presentations from the San Francisco meeting and is available in several configurations. The AAO 2019 Complete Package includes all recorded programming: content from the seven Subspecialty Day meetings, the AAOE Practice Management Program, and highlights from AAO 2019. Nearly 200 hours are included. You can also purchase individual Subspecialty Day meetings, just the AAO 2019 Highlights, or only the AAOE Practice Management Program.

**Learn more** at aao.org/ondemand.

#### **MEMBERS AT LARGE**

#### **Troutman Prizes**

Troutman Cornea Prize for Young Clinician Investigators. This award,

established by a Castroviejo Cornea Society Founder, Richard C. Troutman, MD, DSc (Hon), is awarded annually to the investigator under 41 years of age who authored the best paper published in *Cornea* the year before.

This year's recipient is **Marina Bertolin, MSc,** of the Fondazione Banca degli Occhi del Veneto in Italy, for



Ms. Bertolin

her paper, "Optimized Protocol for Regeneration of the Conjunctival Epithelium Using the Cell Suspension Technique." Ms. Bertolin was awarded a \$5,000 honorarium from the Troutman

Endowment and had the opportunity to present her work at the annual scientific meeting of the Cornea Society, which took place prior to AAO 2019.

"Receiving this award is tremendously satisfying for all of us at the Fondazione Banca degli Occhi del Veneto who have worked on this project," said Ms. Bertolin.

"Over the past two decades, our group in Venice has worked toward the development of a treatment for patients with limbal stem cell deficiency. The grafts prepared in our GMP Factory have been transplanted onto over 200 patients. Such experience suggested that stem cell therapy could become a potent and valuable therapeutic tool in clinical practice.

"Therefore, a few years ago, we thought it would seem plausible that even transplants of autologous conjunctival epithelial sheets, generated by ex vivo cultured conjunctival stem cells, could represent an appropriate therapeutic option for conjunctival diseases refractory to current therapies. As a matter of fact, every year more than 1,000 patients in Italy and more than 100,000 worldwide develop severe disorders of the ocular surface in general and of the conjunctiva in particular. This led our group to set up a collaborative effort with the University of Padova and Verona in Italy and the University of Antwerp in Belgium to identify where conjunctival stem cells

were located and how we could isolate and culture them to obtain grafts of clinical transplantable grade. The next step that we are working on is to move our findings onto a clinical setting."

Richard C. Troutman, MD, DSc (Hon) Prize. This prize is awarded on behalf of the International Society of Refractive Surgery to a young author



Dr. Medeiros

published in the Journal of Refractive Surgery.

This year's recipient is Carla Santos Medeiros, MD, PhD, a postdoctoral fellow in refractive surgery and cornea at Cole Eve Institute at

the Cleveland Clinic Foundation and head of Refractive at Santa Casa da Misericórdia in Rio de Janiero, Brazil. Her paper, "The Impact of Photorefractive Keratectomy and Mitomycin C on Corneal Nerves and Their Regeneration," discusses new histological findings that provide insight into neural remodeling processes after corneal refractive surgery. Dr. Medeiros received a \$5,000 honorarium from the Troutman Endowment and presented an honorary lecture during Refractive Surgery Subspecialty Day 2019.

Dr. Medeiros said, "Receiving the Troutman Award is a true honor for both myself and our team at the Cole Eye Institute. We look forward to more opportunities to further investigate the wound-healing response process after refractive surgery."

Suzanne Véronneau-Troutman Award. The Suzanne Véronneau-Troutman Award, established by Suzanne Véronneau-Troutman, MD, FRCS(C), FACS, and awarded annually by Women in Ophthalmology (WIO), recognizes an ophthalmologist who has done the most in the preceding year to advance and enhance the position of women in ophthalmology.

This year, at the WIO Reception and Awards Ceremony held during AAO 2019 in San Francisco, this award was presented to Judy E. Kim, MD, who is professor of ophthalmology at the Medical College of Wisconsin in Milwaukee.

Dr. Kim has worked tirelessly to enhance and improve the professional environment of women ophthalmologists through her many leadership roles that provide unparalleled opportunities



Dr. Kim

and platforms to influence, support, and speak on behalf of other women ophthalmologists. During the past year, and all throughout her career, she has used her leadership roles to promote and

support women. This effort will have a lasting impact not only on individual women but also on all women ophthalmologists for years to come. She is also a great mentor to fellows, who find her to be approachable and always willing to share her wisdom.



**Foundation** 

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"The Academy represents the very best that medicine has to offer. The amazing innovations and contributions our members make to our patients and our profession keep me optimistic and enthusiastic about our future. I support the Academy Foundation to help keep this crucial community active and empower our patients' lives."

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