

The **one-and-only** rapid point-of-care test that can detect levels of MMP-9, a key inflammatory biomarker for ocular surface disease.

InflammaDry accurately identifies patients with ocular surface disease allowing for an optimal treatment pathway.

InflammaDry Benefits:

- CLIA waived
- Results in minutes
- 4 simple steps
- Minimally invasive
- Requires no special equipment



For more information, contact Quidel at **800.874.1517**



InflammaDry

AD10242800EN00 (10/22)



CONNECT WITH WORLD-CLASS EXPERTS IN REFRACTIVE AND CATARACT SURGERY

Only **ISRS members** have access to exclusive opportunities and programs to network with leading experts from 90+ countries and stay clinically up-to-date.

Visit isrs.org/benefits to learn more about your member benefits.

isrs.org/benefits



Letters



MA's Privatization of Medicare

I thought the October Opinion article (“MDs Get a Cut, MA Gets a Raise”) by Ruth D. Williams, MD, was great. I’d add that the Medicare Advantage (MA) program is a concerted and successful effort to privatize Medicare. About half of Medicare beneficiaries are

in MA plans already, and the number is growing.

The commercial MA carriers entice unsuspecting seniors into signing up with celebrity ads touting low premiums and extra benefits. The ads don’t mention narrow networks, prior authorizations, and step therapy that the carriers use to erect barriers to care and pad their bottom lines.

MA may be a good deal for healthy seniors, but it’s a bad deal for people who need care. I can’t tell you how many devastated patients my colleagues and I have had to counsel about their limited coverage. They all thought that their MA plan was better than Medicare until they found out that they couldn’t go to the doctor or hospital they trusted, or they had to use an inferior drug with more side effects.

CMS incentivizes this behavior by shoveling more cash into the coffers of the already highly profitable commercial insurers administering the plans and refusing to rein in their abusive access-

limiting practices.

While MA plans are looking at an 8% raise next year, physicians are facing an

almost symmetrical 8.5% cut (the 4.5% cut to the Medicare Physician Fee Schedule and an additional 4% PAYGO cut related to deficit spending).

This is such a good deal for the carriers that some are abandoning traditional Medicare supplement plans and offering only MA plans. Ophthalmologists can expect to see more privatization of Medicare in 2023.

David B. Glasser, MD

*Academy Secretary for Federal Affairs, Washington, D.C.
Johns Hopkins University School of Medicine, Ellicott City, Md.*

WRITE TO US. Send letters to *EyeNet Magazine*, AAO, 655 Beach Street, San Francisco, CA 94109; e-mail eyenet@aao.org.

EDITOR’S NOTE: If you want to let your representatives know how their constituents are being harmed by Medicare Advantage plans, you can become a Congressional Advocate. Learn about the Academy’s program and apply at aao.org/advocate.