

## Board certification

# Changes include 'board eligible' status, governance

Following two months of presentations of — and feedback on — a model for board certification in optometry, the Joint Board Certification Project Team (JBCPT) has made several changes and clarifications to the proposed model, as recently as March 23 and 31 via WebEx meetings.

The change that would affect all optometrists intending to become board certified is the creation of a new designation: *board eligible*.

The designation responds to concerns that new practitioners, or those on the path to certification, would have no way of indicating to the public or third parties their seriousness about the credential.

To be classified as board eligible, a candidate for board certification would submit the eligibility application, application fee, and evidence of the following initial qualifying requirements:

- ❖ Graduate of school or college of optometry accredited by the Accreditation Council on Optometric Education (ACOE).
- ❖ Possession of an active license to practice therapeutic optometry in a state, District of Columbia, U.S. commonwealth or territory.
- ❖ Clearance of a search of the National Practitioner Data Bank (NPDB) and Health Integrity and Protection Data Bank (HIPDB)
- ❖ Statement of adherence to American Board of

Optometry Code of Ethics

Upon confirmation of the requirements, the American Board of Optometry (ABO) would confer that the candidate is board eligible for a period of one year.

Candidates could renew their board eligible status for up to three years total by submitting of proof of completion of 50 points progress toward completion of the Post-Graduate Educational Requirements by the end of each year of board eligibility.

The Post-Graduate Educational Requirements of 150 points would remain unchanged.

A board eligible optometrist should pass the Board Certification Examination within 12

months of completing all 150 points and submitting an application for the Board Certification Examination.

In addition to approving the new designation, members of the JBCPT voted to alter the composition and governance of the proposed American Board of Optometry:

- ❖ Under the new plan, the American Academy of Optometry (AAO), the Association of Regulatory Boards of Optometry (ARBO) and the Association of Schools and Colleges of Optometry (ASCO) would each have one member on the board.
- ❖ The AOA would have two members, reflecting a frequently stated desire of

optometrists that practicing ODs have a meaningful voice on the new organization.

❖ A practitioner initially licensed less than five years would represent the American Optometric Student Association.

❖ There would be a member of the public on the board, reflecting the importance of ensuring quality care and education that the board would place on its work.

In earlier drafts of the model, the American Board of Optometry had a representative of the National Board of Examiners in Optometry.

At AOA affiliate and regional meetings, there were some concerns voiced that the

*See Changes, page 12*

## Project team takes questions about proposal

In order to shed further light on the proposed model for board certification, AOA News asked members of the Joint Board Certification Project Team (JBCPT) to answer common questions about the process. To submit a question to the team, write: [questions@jbcpt.org](mailto:questions@jbcpt.org).

**Q: If the AOA House of Delegates vote is "Yes," is there any further opportunity for input on the final model for Board Certification?**

A: The Joint Board Certification Project Team has developed a "model" for a board certification process. While the model has some detail, even more detail will need to be developed before board certification could begin in earnest. If the AOA House of Delegates accepts the model, the process would become the responsibility of the American Board of Optometry. That organization should accept input from the profession as final details are developed prior to implementation of the plan.

**Q: If the house vote is "No" at the AOA House of Delegates, will the issue of "BC" die?**

A: The issues of competence and board certification have surfaced many times in the past, at least once every decade for the past 40 years. As the U.S. health care system continues to evolve, there will likely be ever-increasing demands on the profession of optometry to have a process to demonstrate ongoing competence in a manner such as board certification and maintenance of certification. The AOA will not support board certification should it be defeated in the AOA House of Delegates.

**Q: Is there a game plan to come up with initial funding to get this off the ground? (\$2 million has been quoted). Our AOA affiliate members will be asking as they will be fearful of the dues increase or special assessments.**

A: Along with other organizations, the AOA could be one of the "funding entities" to finance the startup of the

American Board of Optometry. Any funding plan involving the AOA would be in the form of a loan with interest, so it would not affect dues.

**Q: Why do the residency and the Academy fellowship points only apply if the have been completed in the last 10 years? An accredited residency is an accredited residency no matter when it was completed. The same can be asked about the AAO. Why is there a limited value on having passed the AAO last year vs. more than 10 years ago?**

A: This was discussed and debated extensively by the JBCPT. Our model for board certification and maintenance of certification is based largely on that of the American Board of Family Medicine and other member boards of the American Board of Medical Specialties. Nearly all of their programs have time limits of 10 years, so the JBCPT believes that a similar 10-year sunset for residencies and fellowship is a reasonable one. The premise

used by other organizations is that the currency of residency or any formal training program becomes stale over time.

**Q: I would want to know specifically what happens if the House of Delegates votes "no," since there are many other agencies involved. Will the other agencies continue to carry the torch?**

A: The leadership of all the participating organizations saw the wisdom in working together with all stakeholders in optometry to study this issue. While it is thought that the decision of the AOA House of Delegates is crucial to this decision, it is possible that another group either inside or outside of optometry could move forward with a board certification process.

**Q: Does the AOA have an official position regarding adoption of the JBCPT recommendations?**

A: Like the rest of the profession, the AOA Board of Trustees saw the final product

when it was released by the JBCPT in January. The Board will make the formal motion that will begin and allow discussion by the AOA House of Delegates. The motion will likely recommend support of the model as well as recommend that any newly formed entity obtain significant input from the profession before any final process is rolled out.

**Q: Was what we heard at the Presidents' Council the final program or will it be further modified before the House of Delegates in Washington, D.C.?**

A: The model released by the JBCPT has been modified by the Project Team and could be further before being voted on by each of the organizations. It will certainly be further refined and developed by the American Board of Optometry if the process moves forward.

Issues that arise through the presentation of the model to the profession should be forwarded to the JBCPT for consideration.



## EYE ON WASHINGTON

# Optometrists not subject to DMEPOS deadlines

Unlike suppliers of wheelchairs and home oxygen equipment, optometrists and most other health care practitioners will not be required to post surety bonds or become accredited in upcoming months in order to continue to provide goods or services for Medicare patients, according to the AOA Advocacy Group.

The U.S. Centers for Medicare & Medicaid Services (CMS) has been reminding suppliers to get accredited by Sept. 30, but those announcements do not always make clear that optometrists are exempt.

The Medicare Improvements for Patients and Providers Act (MIPPA) prohibited the CMS from requiring physicians and other health professionals to comply with the accreditation requirement unless the CMS develops quality standards specifi-

cally for physicians and other health professionals.

The CMS has announced that, beginning in May, Medicare's durable medical equipment benefit will apply only to items obtained from equipment suppliers that have posted special surety bonds.

The new requirement is an effort to curb Medicare fraud and abuse in the home health supply industry, according to the agency.

However, health care practitioners are not subject to the surety bond requirement, the AOA Advocacy Group notes.

Congress mandated the surety bond requirement under the Balanced Budget Act of 1997, following reports of widespread Medicare fraud among some suppliers of durable medical equipment, prosthetics, orthotics and supplies (DMEPOS) — notably providers of wheelchair and

oxygen equipment.

Congress added the accreditation requirement broadly in the Medicare Modernization Act of 2003, until relaxing the burden on physicians with MIPPA last summer.

"The DMEPOS surety bond and accreditation requirements were imposed to address numerous reports of improper practices by retailers of large home health supplies such as wheelchairs and oxygen units," emphasized Jon Hymes, director of the AOA Advocacy Group.

"Health care practitioners are not the problem. Although the CMS technically classifies eyeglasses as durable medical goods, the new requirements do not apply to doctors providing eyewear to their patients," said Hymes.

"For that reason, while home health goods retailers will be required to post surety bonds by May 3 and be

accredited by Sept. 30, optometrists and other physicians will not," Hymes said.

The CMS originally planned to require health care practitioners to post the surety bonds and to get accredited.

The AOA and other associations successfully convinced the CMS to revise the proposal to more accurately reflect the intent of Congress.

After Congress stepped in to address accreditation, and further meetings with the AOA and other allies, the Medicare agency specifically exempted physicians from the accreditation

requirement (see *AOA News*, Jan. 16).

The DMEPOS surety bond and accreditation requirements have been the subject of several recent CMS bulletins and health care provider trade publication articles.

As a result, the AOA Advocacy Group finds some optometrists may still be concerned about the surety bond requirement and accreditation.

The CMS estimates that these two requirements would cost \$2,500 per doctor per practice location if there were no exemptions.

## Changes,

*from page 7*

NBEO representative, serving on behalf of a test-creating and administering organization, could have conflicts when the board selects testing vendors or evaluates proposals.

Two additional changes were made to the model:

- Members of the American Board of Optometry would serve a maximum of two three-year terms, with staggered initial appointments.

- Also, after the initial board is appointed, subsequent appointments would be selected from three persons nominated by the sponsoring organization for each available position on the board.

Noting the changes to the model, and the ongoing dialogue within the profession, AOA President Pete Kehoe, O.D., sent a letter to state optometric association and affiliate leaders April 3 asking that they let the dialogue continue rather than casting votes months before Optometry's Meeting®.

"The project team has listened to concerns and has made a number of changes to the proposed board-certification model as a direct result of

input from the members," Dr. Kehoe wrote.

"I know many of you are holding meetings in the next few weeks, and I am asking you to hold off making any final decision on a state position or on instructing your delegates to vote a particular way. What your members would be voting on today may well be different by the time this motion goes to the House," he noted.

"Please keep your options open so that your delegates can benefit from the additional information and discussions at Optometry's Meeting®. We will continue to send you and your members material relative to this issue on a regular basis to aid in your discussions," he said.

Dr. Kehoe noted that project team members are continually learning of examples where decision-makers are considering health reform initiatives and terms like "value" and "board certified" are coming to the forefront. AOA members are encouraged to make constructive comments on the model, and to continue to monitor the *AOA News* and Web site for updates.

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Hurricane Rita.  
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