AOA presses CMS as certification schemes advance

The AOA Washington office is now pressing officials at the U.S. Centers for Medicare & Medicaid Services (CMS) to ease the burden of unnecessary certifications on optometrists.

DMEPOS Accreditation – Over the last five years, the AOA has fought to ensure that ODs are treated fairly as Medicare durable medical equipment, prosthetics, orthotics and supplies (DMEPOS) procedures have been rewritten as part of a government effort to combat massive fraud, particularly related to purchases of “scooter” mobility devices for seniors.

In 2006, the AOA won a major regulatory victory when CMS officials reversed course and announced that prosthetic devices that aid vision (glasses and contacts) would not be among the items and services subjected to DMEPOS competitive bidding – a requirement that the agency insisted on just nine months earlier.

At the same time, the CMS continued to work on a proposal to require Medicare DMEPOS suppliers of prosthetics or consumer medical supplies to be formally accredited to meet standards set by a CMS-designated, independent certification agency. Last January, without exempting ODs and other physicians, CMS officials subjected their misguided DMEPOS accreditation scheme on all “new” suppliers, including ODs and other physicians merely opening a new location.

The AOA — joined by the American Medical Association and groups representing ophthalmologists, podiatrists, orthopedic surgeons, physical therapists, occupational therapists, and others providers — have vehemently opposed the regulation of physicians, for whom DMEPOS products, while essential to patient care, are a relatively small share of services. Both as part of the coalition and through direct contacts with the CMS, the AOA has been seeking an alternative to the CMS “one-size-

New course offers ‘how-to’ on practice sales, purchases

Practice Transitions: Strategies for Making Them Happen – a first-of-its-kind comprehensive, day-long program on the successful transition of optometric practice ownership – is being launched this fall by the AOA Information & Member Services Group (AOA-I&MSG).

The new AOA Practice Transitions course will be offered at major optometric meetings around the nation over the next two years. The initial Practice Transitions presentation is scheduled for Oct. 1, during the EastWest™ Eye Conference in Cleveland, Ohio (www.eastwesteye.org), with the second presentation See Course, page 4

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PRESIDENT’S COLUMN

The Optocrat Party

Optocrat, loosely defined, is an optometrist or friend of the profession who wholeheartedly supports our legislated profession.

All of us who support candidates for state or federal office, not based on party affiliation but for legislative agendas dedicated to the best possible patient care — including the ability of optometry to provide that care at our “full scope” and to be reimbursed equally with our medical colleagues — fall into the category of Optocrat.

Like it or not, optometry is a legislated profession at both the state and national levels. The historical and future success of optometry in your state and our nation’s capital comes from the combined efforts of a strong membership and the ability for our message to be heard by the elected officials.

With only two months (thank goodness) remaining in what likely could be the most expensive and drawn-out presidential campaign in American history, optometrists (aka: Optocrats) across the country have the opportunity to make a difference in state and national political races.

Nearly all state and federal political candidates (and certainly the two presidential contenders) have declared health care reform to be a top priority immediately upon their election.

Your AOA-PA and our Washington office team of staff and volunteers has done a great job of sorting through the candidates and their platforms to determine the candidates who are most likely to give optometry a fair shake in the health care debate that will go full steam ahead in January 2009.

In addition, your AOA-PA has a reputation of supporting the majority of the winning candidates based on the information gleaned from our political advisers in Washington.

As you can see from the two presidential nominees’ monthly reports, all candidates are raising and spending an incredible amount of money on the election.

The outcome will determine the extent of health care reform that will occur in the next two-year congressional cycle – and optometry MUST be at the table of all discussions.

In addition, both parties are going all out in hopes of holding or shifting the party control in the House and Senate in Washington, D.C.

The outcome will determine the extent of health care reform that will occur in the next two-year congressional cycle – and optometry MUST be at the table of all discussions.

The AOA-PA set a two-year (congressional election) goal of raising $2 million dollars, and we are getting close (currently at $1.6 million), but we need every AOA member to step up and INVEST in our profession’s political future.

AOA-PA investments allow us to financially support the candidates who are likely to vote like an Optocrat.

Contrary to what can be the conventional wisdom, PAC support of candidates does not “buy votes.” What it does is allow us the opportunity to be recognized as a supporter of those candidates who deliver optometry’s message to the governing bodies that determine our level of participation in the health care systems of today and tomorrow.

In addition, the AOA-PA makes investing in your future easy, with one-time and automatic monthly credit card debiting (visit www.aoa.org/aoa-pac.xml) and, of course, they will happily accept all personal (no corporate) checks.

I challenge each of you to step up and invest the equivalent of one eye exam or office visit per month to AOA-PA to help us exceed our goal of $2 million this election cycle.

Imagine the political potential of the Optocrat party in Washington as we build upon the political successes on behalf of your patients and our profession. (Remember the 10.6 percent Medicare cut that was averted? The AOA worked over-time on our behalf, proving once again that the Optocrat party has a voice in Washington and our system works).

So please visit www.aoa.org/aoa-pac.xml today and invest (or increase your current investment) in your profession’s political future.

Dr. Peter H. Kehoe
President

P.S.: Remember your state PAC at this election time. Our scope of practice and inclusion in state health care changes are determined in your state capitol, so be sure to invest an additional exam or office visit in your state PAC every month. Both will give you a great return on your investment.
set for Oct. 19 as part of the Great Western Council of Optometry (GWCO) in Portland, Ore. (www.gwco.org). Intended for both established optometrists who wish to sell their practices or add an associate or partner as well as for new optometrists who are seeking to purchase or buy into an existing practice, the Practice Transitions program is designed to provide a uniquely comprehensive overview of the practice transition process, according to Ronald L. Hopping, O.D., AOA Board of Trustees member and chair of the AOA-I&MSG’s Practice Perpetuation Project Team.

“Across the country, many established optometrists report they are unable to find buyers for their practices as they approach retirement. At the same time new optometry school graduates continue to report they are unable to find established practices to join or purchase,” Dr. Hopping said. “As a result, there are cases in which established optometrists, counting on practice sale proceeds to provide a nest egg, may not be able to retire as soon as or as securely as anticipated. Many new optometrists – whom, surveys show, generally aspire to traditional independent practices – have trouble establishing their careers in their preferred practice setting,” he said.

“Established optometric practices — which in many cases may be the only source of eye and vision care in a community — could close, leaving patients without adequate access to eye and vision care. In fact, many believe the tradition of independent optometry practice itself may be threatened,” Dr. Hopping said.

Formal studies (see “The future of optometric practice?” The results of a survey of optometrists and optometry students,” Optometry: Journal of the American Optometric Association, October 2004) indicate established practices often go unsold because new and established practitioners are unable to form workable partnerships or associations, which ultimately lead to a transfer of practice ownership, or because the terms of a sale (in particular, the practice price) cannot be agreed upon. In many other cases, practitioners are simply unable to secure financing for the sale of a practice.

The new Practice Transitions course was developed to help prevent such problems by addressing the factors essential to the success of practice ownership transfer including:

- The preparation of a practice for sale
- Tips for structuring successful working relationships between a new and established practitioner
- Financial considerations and deal structuring that will help enable new practitioners to manage unprecedented levels of education debt
- How new practitioners can find the practice they desire and established practitioners can find the associate or partner they seek
- Tips for helping establish practice value
- The structuring of sale agreements and the securing of financing
- Due diligence and tax considerations in a practice sale.

The steps in a successful practice transition are covered in a series of lectures by nationally recognized experts in their respective fields. Each lecture will be supplemented with handouts and work sheets.

For additional information and a complete schedule of Practice Transitions courses around the nation, contact Practice Transitions staff person Stacey Lales at 314-983-4111, or see the AOA Web site Practice Transitions page, www.aoa.org/practice-transitions.xml.

AOA offers tools to help ODs decide if vision plan is right for them

The AOA Eye Care Benefits Center (ECBC) offered a look at the basic concepts involved in evaluating participation in an eye or vision care plan in the August issue of Optometry: Journal of the American Optometric Association.

Author Mark J. Hennen, O.D., chair of the ECBC, noted that more than 75 percent of patients are covered by insurance plans, according to the most recent AOA Third-Party/Managed Care Survey.

The survey data also show that while insurance plans account for three-fourths of the patients, they only account for two-thirds of the revenue.

Participation in third-party plans is a necessity for most optometrists today, but the insurance programs must be carefully evaluated before making decisions regarding the benefits to the practice, according to the article.

To assist practitioners with their decision, the AOA Web site now features a new “Evaluating a Plan/Making a Business Decision” page that provides detailed information on the assessment of insurance plans (www.aoa.org/BusinessDecision.xml).

The Web page includes an interactive chair cost calculator to help optometrists determine how much it costs to provide care in a practice based on the optometrists’ individual expenses (www.aoa.org/9619.xml).

The ECBC offers a three-step approach to evaluating participation in an insurance program:

- Know the insurance plan.
- Know the practice and how much it costs to provide care.
- Know the specifics of the contract being offered.

Future articles about general points to consider when assessing insurance plans, chair costs and contract analysis will be published in upcoming issues of Optometry.

To view the full article, visit http://www.optometry-journal.com/issues/contents?issue_key=81529-1839(08)X0007-7.
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*Source: 2008 Transitions COA Consumer Survey results

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Optometric researchers prioritize new projects

Optometric researchers recently met for a four-day intensive Summer Research Institute to explore potential new areas of clinical research. The Institute was co-sponsored by the AOA's Council on Research and the American Academy of Optometry’s Research Committee. Optometrists came from 12 schools and colleges of optometry and the Department of Veterans Affairs. The meeting was held on the campus of The Ohio State University.

The Institute began with a reception at the Blackwell Hotel, which was hosted by the Ohio Optometric Association.

The goal of the Summer Research Institute was to produce collaborative clinical research project proposals that will be submitted for future funding. Attendees met in the mornings for lectures from faculty with expertise in epidemiology and research methodology. In the afternoons, attendees broke out into small work groups to focus on specific research questions.

Facilitators who had a proven track record in research design and funding were assigned to the work groups.


Anne E. Schaffner, Ph.D., scientific review administrator for the Division of Extramural Research of the National Eye Institute participated as faculty for the Institute.

Researchers worked on proposals in their groups that will address clinical issues in glaucoma, low vision, contact lenses, pediatric vision and the prevalence of refractive error in underserved populations. The work groups set timelines for developing their proposals.

“Previous Summer Research Institutes have resulted directly or indirectly in funded clinical research study proposals totaling over $58 million dollars from the National Eye Institute, Department of Veterans Affairs and industry. Those studies included work in myopia, keratoconus, convergence insufficiency and vision training, low vision, and children’s vision screening, to name a few,” said Dr. Zadnik, chair of the Council on Research.

“I had a phenomenal experience at ‘Summer Research Camp.’ The faculty members are movers and shakers who are personally dedicated to mentorship. Over the course of four days, I learned research design and grant-writing fundamentals and worked with colleagues to develop a study of visual impairment in community health centers. I believe that the program is so successful because it channels energy into sustainable collaborative projects and relationships. The AOA, the AAO, and the Institute faculty have made a science of paying it forward,” said Christine Harden, O.D., from the University of Houston.

AOA Practice Transitions is a comprehensive one-day seminar covering the fundamental steps to successfully buying or selling an optometric practice. You’ll learn about:
- Buyer/seller needs, wants and expectations
- The difference between ‘buying out’ and ‘buying in’
- Financing and ownership options
- Planning and preparation techniques

Two seminars are planned this fall:

October 1, 2008
Renaissance Cleveland Hotel
Cleveland, Ohio

October 19, 2008
Doubletree Hotel Portland - Lloyd Center
Portland, Oregon

To register or learn more, log onto www.aoa.org/practice-transitions.xml Or, contact Stacey Liles at 314-983-4111; smilies@aoa.org.
Dr. Jennifer Planitz
Optometrist
Explorer
Luxottica Partner

Jennifer Planitz loves trekking in the rugged New Mexico landscape. When she is not trekking, or teaching jazzercise, or contributing an article to a professional journal, Dr. Planitz and her husband run one of New Mexico’s busiest optometry practices. Rio Eyecare Vision Source in Rio Rancho, NM has a staff of 12 and offers a specialty in pediatric optometry. She cares a great deal about her patients, her dedicated team and the partners she chooses.

Working together with Luxottica allows her to offer her patients the unsurpassable quality and power of the best brands while she enjoys the impeccable service and financial growth only possible with a partner that truly understands her business. Learn more about the benefits of partnering with Luxottica at www.luxandme.com.
Section offers promotional kits, staff training for Paraoptometric Recognition Week

The AOA Paraoptometric Section (AOA-PS) has designated Sept. 14-20, 2008, as Paraoptometric Recognition Week. Now in its sixth year, the recognition week is designed to honor paraoptometrists for their dedication to the patients they serve and to the profession of optometry.

“As an integral part of the optometric team, paraoptometric professionals work side-by-side with optometrists each day to deliver extensive eye and vision health care to patients across America,” said Peter H. Kehoe, O.D., AOA president.

Recognition of paraoptometry as a profession hinges on the involvement of the paraoptometric members and support of optometrists and other health care providers.

By paraoptometrics seeking education, acquiring new skills and becoming certified through the Commission on Paraoptometric Certification, the high standards for the profession challenge other support personnel who work within the profession to do the same.

Sue McAteer, CPOT, immediate past chair of the AOA-PS, emphasized that the success of the Paraoptometric Recognition Week depends also on doctor participation.

This recognition is another opportunity to build on the great team relationship between optometrists and paraoptometrists, she said. The AOA-PS suggests a variety of ways to celebrate the week and provides Paraoptometric Recognition Week Promotional Kits free of charge to help in making plans for the observance. Kits may be requested by sending an e-mail to jvmurphy@aoa.org.

Training tools

One way to better recognize paraoptometric staff is by providing ongoing training.

The PS offers education modules for staff training. Office personnel may use this training tool in the comfort of their own home. Bausch & Lomb funded the “Soft Contact Lens Wear and Care” module, and Luxottica funded the “ABCs of Optical Dispensing” module, both of which have been very popular with optometric professionals.

There are a total of six education modules available. They may be purchased separately or as an education library for an office.

Doctors are encouraged to be creative in planning festivities recognizing Paraoptometric Recognition Week. Suggestions include:

- providing a Paraoptometric Section membership for a paraoptometric in the office,
- treating staff to lunch or dinner, outfitting staff with AOA apparel and gift items, gift certificates, flowers or candy.

The activity or gesture may be big or may be quietly expressed; either way, doctors are urged to participate in this opportunity to extend appreciation to paraoptometrists.
SGRC exhibits at state legislators’ meetings

State Government Relations Center (SGRC) Executive Committee volunteers and staff represented optometry again this year in the exhibit hall during the National Conference of State Legislators (NCSL) annual meeting July 22-25 in New Orleans and the American Legislative Exchange Council (ALEC) annual meeting July 30-Aug. 1 in Chicago.

These two meetings drew a combined total of more than 9,000 state legislators, legislative support staff, and other important policymakers. In an effort to significantly increase the visibility of optometry in the exhibit hall at NCSL, VSP joined the AOA for the first time. VSP showcased one of its two 42-foot mobile eye care clinic buses.

AOA, Transitions help members better serve Hispanic patients

Responding to the growth of the Hispanic population and the importance of supporting optometrists in meeting the needs of their Hispanic patients, the AOA and Transitions Optical are joining forces to deliver new communications tools and resources that focus on the unique needs of the Hispanic population.

The AOA launched its “Hispanic Vision Initiative” during a press event at Optometry’s Meeting® in June and announced plans for professional and public education, supported by Transitions.

Specifically, education is planned for optometrists, geared toward helping them better understand and accommodate specific cultural differences and risk factors pertaining to Hispanic consumers.

As part of its “Hispanic Vision Initiative,” the AOA is developing a new Spanish section on its Web site. Translations in three key public information areas are being supported by a grant through the Transitions Partners in Education™ program, with additional translations to come.

This will complement the range of Spanish-language patient education tools already available through the AOA and Transitions.

“Today, more than 3,500 AOA member practices are located in areas with significant numbers of Hispanic residents,” said Kevin Alexander, O.D., Ph.D., AOA immediate past president. “As this number increases, it is more important than ever for eye care professionals to better understand this demographic and to overcome existing language and cultural barriers. Transitions shares the AOA’s commitment to address the public health needs of this group and is already taking a lead in arming eye care professionals with education and tools to reach out to Hispanic patients.”

“Understanding the unique eye health and communication needs of the Hispanic population is critical,” said Martha Rivera, Hispanic market segment manager, Transitions. “For example, Hispanic patients are at greater risk for many eye and systemic diseases, which have implications for eye health – but they are unaware of how to protect themselves. We are honored to support the AOA in its efforts and hope to further raise awareness of the risk factors and encourage Hispanic patients to discuss the need for regular eye exams and proper vision wear with their optometrists.”

To support the initiative on an ongoing basis and pursue development of future resources, the AOA has assembled a project team dedicated to helping optometrists better serve the growing Hispanic market.

The members of the project team are:

- Hilary Hawthorne, O.D., chair
- Madeline Romeu, O.D.
- Emilio Balus, O.D.
- Martha Rivera, Transitions
- Sarah Lora, director of the Puerto Rico branch of Burson-Marsteller
- Gwendolyn Lanzer, AOA associate director of Marketing & Internet Services

To guide the initiative, the AOA also has announced plans to release a patient survey, supported of its “Hispanic Vision Initiative,” the AOA is developing a new Spanish section.

The AOA and VSP worked together to increase the visibility of optometry in the exhibit hall at the National Conference of State Legislators annual meeting. Representing VSP and showcasing its Mobile Eyes clinic were G. Kenneth Johnson, O.D., (left) and Randolph D. Lee, O.D., (right) both former chairs of AOA State Government Relations Center committees, who are seen here with current AOA SGRC members Drs. Barrett and Barry.

Joining SGRC members Lee Ann Barrett, O.D., (right) and Timothy J. Barry, O.D., (left) in the AOA booth at the NCSL meeting were Optometry Association of Louisiana Immediate Past President Mark J. Ray, III, O.D., (second from left) and Executive Director James D. Sandefur, O.D.
New in Practice Series draws 250, DVD available

This year’s New in Practice Series at Optometry’s Meeting® in Seattle was a hit, drawing the highest attendance numbers to date for the program.

More than 250 seats were filled Thursday and Friday, June 26 and 27, as attendees heard from expert speakers on practice management topics of special interest to new practitioners.

Sponsored by CIBA Vision, the series is designed to provide real-world information and ideas for those starting their careers or changing practice settings. All three sessions from the 2008 series are now available for purchase on DVD-ROM, which includes the speakers’ live audio synchronized with each PowerPoint presentation (see ordering details below).

Following are detailed descriptions of the sessions:

- **Marketing & Networking For Practice Growth**
  - Speakers: Michael Baccaglini, O.D., and Keith Davis, O.D.
  - Growth of an optometric practice relies on sound financial fundamentals. This course discusses concepts such as cash flow, gross vs. net profits, tax considerations for the sole proprietor or S-corporation and retirement planning, among other topics. Also, developing a business plan to acquire financing for opening a practice is presented.

- **Financial Management**
  - Speakers: Keith Davis, O.D., and Laurie Sorrerson, O.D.
  - A successful optometric practice relies on sound financial fundamentals. This course discusses concepts such as cash flow, gross vs. net profits, tax considerations for the sole proprietor or S-corporation and retirement planning, among other topics. Also, developing a business plan to acquire financing for opening a practice is presented and discussed. Course participants will receive a good basic understanding of the financial aspects of starting and running a practice.

- **The Doctor’s Role in Setting Up & Running an Optical**
  - Speakers: Chad Fleming, O.D., and Ankur Kalra, O.D.
  - This course provides a step-by-step process to set up, and be profitable with, an optical. It covers demographic analysis, vendor selection and relationships, patient purchasing, inventory management, lab pricing negotiations, going direct or through a buying group, training staff, and other insights.

The New in Practice series is intended to help ODs starting their careers or considering changing practice settings, including "Marketing & Networking For Practice Growth," which 250 attended June 26.

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CLCS honors researchers, accomplished members

The AOA Contact Lens and Cornea Section (CLCS) honored promising researchers and outstanding accomplishments at Optometry’s Meeting® in June.

Student and Resident Research Award Winners included:

- **Research Topic:** “Combating Microbial Keratitis in our Contact Lens Patients: Prevention and Treatment.”
  - First place: Renee Phillips (ICOCO), second place: Dan Friederich (UHCO), third place: Premilla Banwait (UCBSO), sponsored by Allergan.

- **Research Topic:** “Most challenging contact lens case” (Residents).
  - First place: Catherine Pannebaker, O.D. (OSUCO), second place: Opal Amin, O.D. (UHCO), third place: Shana Braifman, O.D. (ICOCO), sponsored by AMO.

- **Research Topic:** “Unique Applications of Silicone Hydrogel Lenses.”
  - First place: Brett Sobieralski (UHCO), second place: Erin Draper (PCO), third place: Kirsten Harwood (PCO), sponsored by CIBA Vision.

- **Research Topic:** “Contemporary Contact Lens Management of Presbyopia…Vision Correction Beyond Monovision.”
  - First place: Mavis Armbruster (UMSL), second place: Sarah Hetu, O.D. (NSUOCO), third place: Anita Han (ICO), sponsored by CooperVision.

- **Research Topic:** “My most challenging contact lens case” (Students).
  - First place: Andrea Needham (ICO), second place: David Meyer (SCCO), third place: Chaitali Shukla (ICO), sponsored by the CLCS.

Awards for first place were $2,000, round-trip airfare and two nights’ hotel stay at Optometry’s Meeting®, a plaque, and acknowledgment at the CLCS Annual Business Meeting.

Second and third place awards were $1,000 and a certificate.

Other awards presented during Optometry’s Meeting® by the Contact Lens and Cornea Section:

- Dr. Donald Korh Award for Excellence was presented to H. Dwight Cavanagh, M.D., Ph.D. The award is sponsored by CIBA Vision.

- Dr. Rodger Kame Award was presented to James Saviola, O.D., of the U.S. Food & Drug Administration.

The Award is sponsored by The Vision Care Institute LLC.

- The inaugural Luminary Award for Distinguished Practice was presented to Michael DePaulis, O.D. The award is sponsored by Bausch & Lomb.

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2008-2009 CLCS Council from left, Louise A. Sclafani, O.D., immediate past chair; Paul Klein, O.D., chair; S. Barry Eden, O.D., vice chair; LaMar G. Zigler, O.D., secretary; Randy F. Fuerst, O.D., council member; and Glenda B. Secor, O.D., council member. Rob Davis, O.D., installed the council at the annual practice meeting and luncheon on Friday, June 27, 2008.

The Award is sponsored by The Vision Care Institute LLC.

- The inaugural Luminary Award for Distinguished Practice was presented to Michael DePaulis, O.D. The award is sponsored by Bausch & Lomb.
Medicare plans new ID requirements for carrier contact

Beginning next spring, health care providers will be required to provide additional authentication information when they contact Medicare carriers or other Medicare payment contractors, according to a new policy announced last month by the U.S. Centers for Medicare & Medicaid Services (CMS).

Under the new policy, health care practitioners who contact carriers to check on claim status or other matters will be required to provide:

- A National Provider Identifier (NPI).
- The Provider Transaction Access Number (PTAN), and
- The last five digits of the practice’s (or the practitioner’s) tax identification number (TIN).

The new requirements will be applicable to both practitioners who personally contact a carrier’s customer service representatives to obtain information and those who use the Medicare interactive voice response (IVR) system.

The new requirement will take effect March 1, 2009. The AOA Eye Care Benefits Center suggests practitioners be prepared to have the necessary information readily available when contacting Medicare payment contractors and make sure their staffs are aware of the new requirements for provider authentication.

For additional information, see the Medicare Learning Network (MLN) Matters article, Implementation of New Provider Authentication Requirements for Medicare Contractor Provider Telephone and Written Inquiries (NVW6139), which can be accessed on the CMS Web site at www.cms.hhs.gov/MLNMattersArticles/downloads/NVW6139.pdf

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Unfortunately, the Bush administration seemed intent on moving forward with its plan without any changes. In fact, ODs who are applying for DME supplier numbers are being told by the CMS that their supplier application will not be considered without proof of accreditation.

Doctors receiving these notices or other communications from the CMS are being asked to contact Kelly Hipp of the AOA Washington office at khipp@aoa.org / 800-365-2219, ext.1346.

This information is being told by the CMS that their supplier application will not be considered by Medicare without proof of accreditation.
Speakers lined up up for AOA’s EHR seminar

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peakers have been lined up for “Building the Paperless Practice: AOA’s Electronic Health Records Seminar,” Dec. 5-6, 2008, at the New Hilton Baltimore in Baltimore, Md. Presentations will cover what ODs need to know to comply with federal standards and how health information technology may affect future reimbursement.

Other presentations will cover all aspects of implementing electronic health records (EHRs) in a practice, interoperability and security issues related to EHR products, and guidance on what to consider when investing in EHR and e-prescribing products. Industry experts will share the latest news and developments in EHR and e-prescribing. Participants will be able to attend sessions designed specifically for small practices, as well as those for larger practices. The sessions will cover: EHR Implementation: Planning, EHR System Selection, Product Analysis, and E-prescribing: Implementation.

First-hand experience with many of the current optometric software choices. A member of the AOA Health Information Technology & Telemedicine Committee, he lectures on computer hardware, software, and new technologies relating to optometry and ophthalmology practices.

E-prescribing: Dr. McVeigh

Implementation: The Human Element: Scot Morris, O.D.

There will also be a panel discussion on “Going Electronic: Our Experiences” moderated by Kirk L. Smick, O.D., chief of primary care services at the Clayton Eye Center in Atlanta, a full-service eye care facility with 10 ophthalmology and optometric providers. Dr. Smick is the chair of the AOA’s Continuing Education Committee.

Vistakon®, Division of Johnson & Johnson Vision Care, Inc. has generously agreed to provide a grant to be a Global Sponsor of the AOA’s Electronic Health Records Seminars.

Vistakon’s support helps the AOA continue to address the practice management needs and help streamline the efficiency of optometric practices’ electronic health records (EHR) technology and ultimately help practitioners provide better patient care. Panel sponsors of the program are:

- EMRlogic Systems, Inc.
- EyeCodeRight Online
- First Insight Corporation
- OfficeMate Software Solutions, Inc.
- Teleryl, Inc.

A mini-exhibit hall will allow optometrists and office staff to talk with vendors about their specific needs.

The above panel sponsors, EMRlogic Systems, EyeCodeRight Online, First Insight Corporation and OfficeMate Software Solutions, will be featured in the seminar’s Exhibit Hall.

Additional Exhibit Hall sponsors include: Carl Zeiss Meditec, Marco, QM Systems, LLC, Topcon Medical Systems, Inc., and VersaSuite – Integrated Healthcare Solutions.

Registration will open in mid-September. Visit www.aoa.org/paperless.xml.

APHA’s Vision Care Section honors Bailey, projects

T
he Vision Care Section (VCS) of the American Public Health Association (APHA) has named R. Norman Bailey, O.D., MPH, as the recipient of the 2008 Distinguished Service Award (sponsored in part by Vistakon) for his significant contributions and exceptional commitment to promoting and protecting the public and visual health of the nation and internationally.

Dr. Bailey is a professor at the University of Houston and is the course master for the community-based health care curriculum at the College of Optometry. He is serving on the AOA’s Judicial Council and has chaired the AOA’s Ethics and Values Committee.

He has contributed a lifetime of community service to provide access to underserved communities.

He has served on a multitude of boards and advisory boards, some of which include the International Fostering of Ophthalmic Care for Underserved Sectors (inFOCUS), Eye Care for Kids Foundation, Lions Club International, and Prevent Blindness Texas.

To help develop the goals of Healthy People 2010, Dr. Bailey facilitated the collaboration between a number of partners including the Centers for Disease Control and Prevention, the Texas Department of State Health Services, the University of Houston College of Optometry and the Texas Optometric Association.

This collaboration resulted in having vision recognized as a federal health care priority for the first time. Dr. Bailey was the chair of the Public Health/Legal and Ethical Issues Committee for the National Board of Examiners in Optometry and the University of Houston College of Optometry representative to the AOA’s Healthy Eyes Healthy People® conferences.

More recently, he has lent his expertise beyond the United States in serving as a member of the International Advisory Group on Optometric Competencies with the World Council of Optometry.

A project titled “Validity and Reliability of Web-Based OcuSource Visual Acuity Screener” by Lori A. Tai, O.D., and Lily Mac, O.D., was selected for Vision Care Section’s 2008 Outstanding Student Project Award.

The paper investigated the reliability of a new online visual acuity test created by OcuSource, a global visual impairment resource, for the general population — specifically the partially sighted and individuals with progressive eye diseases.

Research results provided feedback on the application to make the acuity test more clinically applicable and user-friendly. Although the OcuSource visual acuity test is currently not an adequate method of monitoring visual acuity at home due to confounding factors, there are improvements that can be made to the application to increase reliability.
Optometrist turns vision expertise to help find missing children

Max Venard, O.D., first learned about iris biometric identification at the American College of Forensic Examiners and instantly thought it was a fascinating technology.

Years later, Dr. Venard came across the Child Project (Children’s Identification Location Database Project) in Boston. The Child Project provides an iris scan for use by law enforcement for identification of children.

Iris scans provide unique identification that is similar to fingerprints, DNA, voice prints, handwriting and others, but is 15 times more accurate than fingerprinting. The scanner translates the ridges, islands, crevices and circles found in the iris to a bar code. It scans about 400 parts and uses roughly 240 of those parts to make the code.

Fingerprint coding uses seven to nine individual parts out of 70 to make a code. “It does not replace fingerprinting,” said Dr. Venard. “It’s one more form of identification in addition to fingerprints, photographs, and DNA. Say the police find a child with a man they know he doesn’t belong with. They can take him and scan him and, if he was registered in the system, know in five seconds who he is.”

On average, there are more than 2,000 reports of missing children in the United States each day. The majority are found and returned to their families, but not all of them.

The Child Project is the only program that offers iris scan code banking with the registration going to a single database repository. The database is maintained by the National Missing Children Organization, a division of The Center for Missing and Exploited Children.

The iris scan systems cost about $9,900.

As part of Dr. Venard’s work on the project, he orchestrated use of a scanner for a local county through the Oklahoma Association of Optometric Physicians (OAOP), where he is president.

“I’m just a guy who came along and said there’s a need and a want and some money that all added up,” said Dr. Venard. “In Oklahoma, the OAOP has offered to bridge the gap between the project and the local sheriffs’ departments by providing our own scan unit to be loaned out to sheriff departments until they get their own.”

The OAOP helped fund the program through grants and gifts from corporate sponsors who are willing to support this effort.

At local events, OAOP optometrists help staff the unit along with the Oklahoma Sheriffs’ Association sheriffs wherever kids will be available with their parents. The sheriffs then submit the scans to the national databank.

At local events, OAOP optometrists help staff the unit along with the Oklahoma Sheriffs’ Association sheriffs wherever kids will be available with their parents.

The sheriffs then submit the scans to the national databank.

Our hometowns can work with our county sheriff’s department and our own patients in helping acquire these scans,” said Dr. Venard. “We have ODs in 72 of Oklahoma’s 77 counties for state coverage. It is a wonderful public relations tool for our county sheriff’s department and their state and national associations. And it is an excellent public relations tool for our local optometrists and our state’s association.”

“The bottom line is it helps with missing child recovery. It helps their families know we, as ODs, care in one more way about their most prized possessions—their children,” said Dr. Venard.

For more information about the project, visit www.thechildproject.org.

For more information about the technology, visit www.bi2technologies.com.

Editor’s note
AOA News is highlighting the admirable charitable work and exceptional patient care that distinguishes members of the American Optometric Association. Got a story to share? Drop a line to RAFoster@aoa.org.
After a sustained campaign by the AOA and the Association of Schools and Colleges of Optometry (ASCO), the Health Resources and Services Administration (HRSA) announced on July 28 that it would abandon plans to move forward with a controversial rule that would have excluded vision care from an important federal designation and would likely have negatively impacted care for millions of medically underserved Americans.

In an official statement released by the agency last month, the HRSA acknowledged that significant concerns were raised by the AOA and others, which prompted the agency to shelve the proposed rule.

Announced in March, the proposed HRSA scheme was intended to consolidate the criteria for the designation of Medically Underserved Populations (MUP) and Health Profession Shortage Areas (HPSA).

Under the plan, a new method would be called the Index of Primary Care Underservice and would be used for future federal designation of medically underserved populations. A major concern for optometry, the HRSA announced at the same time that it sought to abolish what the agency deemed “no longer used” pediatric, vision care, pharmacy and veterinary care HPSA designations.

In a three-page letter to HRSA Administrator Elizabeth Duke, Ph.D., the AOA — in partnership with ASCO — informed the agency that underserved population and area designations are, in fact, frequently used by the Department of Health & Human Services when determining eligibility for a variety of federal programs.

The May 29 letter specifically noted that the National Health Service Corps uses HPSA designations when assigning clinicians. Working together, the AOA and ASCO stressed to the HRSA that as the United States works toward a more comprehensive health care system with a greater integrated model of primary care, the diagnosis and treatment of eye and vision disorders provided by an optometrist is, and will be, critical to developing a truly authentic continuum of care.

The letter also noted that optometrists are already authorized by law to participate in a number of federal government programs that the HPSA designation affects, the HRSA would be wise to reconsider the criteria for the designation of vision care in HPSA and MUP.

VSP buys Marchon

VSP has acquired Marchon Eyewear, Inc., for $735 million, which was funded through the criteria for the designation of vision care in HPSA and MUP.

Marchon will operate from its New York-based headquarters as an independent entity within the VSP organization.

Airlock and OfficeMate Software will help us continue our vision for growth by expanding our products, services and programs to our global customer base.”

VSP and Marchon will provide the following offerings:
- Vision care benefits and services
- A global distribution channel
- An international portfolio of eyewear brands
- Integrated eyewear design and manufacturing capabilities
- Practice management technology
- Custom interior designs and merchandising systems

For more information, visit www.vsp.com.
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NO RETURNS ACCEPTED AFTER 30 DAYS
Industry Profile: Marchon

The best optometric practices in America know a secret about Marchon – we bring the team to every practice.

You know Marchon as a supporter and cheerleader. You may know us for bringing the industry innovative and high-tech products, such as Flexon and Airlock. You may know Marchon for our great designer eyewear and sunwear collections: cK, Calvin Klein, Coach, FENDI, Sean John, Karl Lagerfeld, Nautica, Nike and Pucci.

What you may not know is Marchon fields a talent-ed sales team. The sales team at Marchon is absolutely focused on providing the tools and resources that can help optometric practices grow their business.

Working as a team, the Marchon sales people have worked with eye care professionals:

- To bring more patients through the door by marketing their practices to the community.
- To help implement inventory control programs that can help increase product turns and improve cash flow.
- To create dynamic, eye-catching windows and retail environments to sell more fashion and luxury products.
- To develop and implement training programs that help staff to become even more effective and revenue-oriented.
- To develop and implement internal and external marketing programs, increasing effective communications between offices and patients.
- To help grow their sunglass business.
- To make doing business more fun and profitable.

Many of Marchon sales representatives are certified to present American Board of Opticianry courses to staff. The topics for these courses are so important and compelling doctors may even choose to attend. Topics range from “Delivering Quality Patient Care,” “Improving Your Capture Rate,” “Controlling Your Retail Prices” and more. You may know that you can place orders on Marchon’s Most Valued Partners (MVP) Web site 24/7. You may not know this site also has tools to help build your business.

Educational and marketing materials are available free on Marchon’s MVP Web site – we ask some thought provoking questions and give you some powerful answers:

- What if I increased my average sale?
- What if I sold more sunglasses?
- What if I had more new patients?

In addition, Marchon’s MVP site includes free information on how to Plan a Style Show, How to Create Effective PR and Ad Campaigns, and how to Increase Your Recalls.

Log on to Marchon’s MVP site at www.marchon.com and click on the MVP icon.

The user name is the account number, and the password is the phone number without dashes, just the seven digits.

Marchon is a proud member and sponsor of the AOA. We also believe “Good Vision is Always in Style” and are helping the Vision Council of America reach millions of Americans by promoting its efforts on our Web site and in our co-op advertisements.

When you’re ready, we’ll bring the team to your practice and that’s how you win the game!

For more information, call Marchon 800-645-1300.

Transitions aims to help practices with new POS materials

Transitions Optical, Inc. is arming eye care professionals with new resources to help educate patients about the advanced performance and healthy sight benefits of Transitions® lenses.

Available point-of-sale materials – all updated with new, lifestyle imagery – include a consumer brochure, posters, counter cards and a window cling to display in office, plus a lens demo card featuring the new Transitions VI technology.

Modeled after Transitions Optical’s national television and print advertising campaign, the consumer brochure highlights the everyday benefits of Transitions lenses and includes a testimonial from a professional photographer who relies on his eyes for his work.

The brochure directs consumers to the Transitions® Healthy Sight for Life Fund Web site for more information about protecting and preserving eye health.

A window cling is also available, reinforcing the importance of healthy sight and encouraging patients to ask about Transitions lenses.

Eye care professionals can give patients a first-hand look at how Transitions lenses work with a new lens demo card.

Updated with the advanced Transitions VI technology, the card can be activated outdoors or by using a ultraviolet demonstration unit to show patients that Transitions lenses are darker – and faster to activate and fade back – than ever before.

In addition to these resources, eye care professionals can log onto the Transitions Online Marketing (TOM) tool to customize their own point-of-sale materials, free of charge. Found at www.TransitionsTOM.com, the TOM tool has been updated with new templates, including community ads, postcards and counter cards.
Shamir launches new Creation lens, promotion

Last month, Shamir released its Creation lenses in PolyPlus Transitions and launched a new “Creation and Cruise Your Destination” promotion.

PolyPlus, Shamir’s proprietary polycarbonate offering, is manufactured in a new state-of-the-art plant in Israel, using the latest energy-ecological saving production technologies and the highest quality control.

The lightweight PolyPlus has the highest impact-resistance, high marks for Bayer testing (above 5), and ultraviolet (UV) protection, according to the company.

“We have matched our new PolyPlus material with the industry’s favorite photochromic offering – Transitions – and the industry’s award-winning Creation progressive lens, to provide patients a super lens in a safe, lightweight material, which blocks 100 percent harmful UVA and UVB rays,” said Raanan Naftalovich, Shamir CEO. “It’s the ideal combination for any patient desiring premium progressive lenses with safety in mind.”

Shamir’s Creation PolyPlus Transitions lenses are available in the following base curves: 1.75, 3, 4.5, 5.5, 6.5, 7.5 and the following power range: -12.00 to +7.50.

Shamir offers new promotion

In conjunction with the release of Creation lenses in PolyPlus Transitions, Shamir’s new “Creation® and Cruise Your Destination” promotion offers all eligible eye care professionals (ECP) the opportunity to win a seven-day cruise of their choice.

For each pair of Shamir Creation lenses sold, practitioners will receive a raffle ticket entered into the “Creation and Cruise Your Destination” drawing.

To celebrate its latest material offering, Shamir will submit two raffle tickets for each pair of Creation PolyPlus Transitions lenses sold.

At the end of the promotion, one winner will get to choose to cruise one of four exotic vacation destinations: Hawaii, Alaska, the Bahamas or the Panama Canal.

“Each month we will award prizes to one ECP, which will include a Sony Handycam camcorder, a $500 Nordstrom gift certificate, an Apple iPod Touch and Maui Jim Sunglasses, all of which will lead up to the Grand Prize Cruise Getaway, which will be awarded in February 2009,” said Matt Lytle, vice president of marketing. “This promotion is a great opportunity for ECPs to share in the experience with friends and family members because the cruise recipient will get to create their own vacation by choosing one of four seven-day cruises to attend. In addition, they’ll be able to choose three lucky friends to bring along for the ride.”

The Creation and Cruise Your Destination promotion is open to all eye care professionals who sell Shamir Creation lenses.

Participants interested in participating are not required to sign up.

The promotion runs until Nov. 30.

For more information on “Creation and Cruise Your Destination” promotion details, visit www.shamirlenses.com/creationcruise.
MEETINGS

September

WISCONSIN OPTOMETRIC ASSOCIATION 2008 CONVENTION AND ANNUAL MEETING September 25-28, 2008 Marriott Madison West, Middleton, WI Jolen Breunig 800/678-5357 jklen@woa-eyes.org www.woa-eyes.org

WEB 5: THE CHILDREN’S FRIENDLY LOW VISION BIAN October 3, 2008 Involveable on demand for 6 months (registration required) 800/678/4500 www.highhouse.org

INDIANA OPTOMETRIC ASSOCIATION FALL SEMINAR October 8-9, 2008 Indiana University Memorial Union, Bloomington, Indiana 317/237-3360 www.ioa.org

MICHIGAN OPTOMETRIC ASSOCIATION, October 15-16, Lansing Center, Lansing, www.themoa.org 517 482-0616

WEB 8: Understanding the LV Exam of the Adult October 16, 2008 (involveable for 6 months) 800/829/0500 www.highhouse.org


November

CONNECTICUT ASSOCIATION OF OPTOMETRISTS 2008 ANNUAL EDUCATIONAL CONFERENCE November 2-3, 2008 Mystic Marriott Hotel & Spa Groton, CT 860/529-1900 info@cteyes.org www.cteyes.org

HAWAI OPTOMETRIC ASSOCIATION PACIFIC RM OPTOMETRY CONFERENCE November 25, 2008 Kailua, Hawaii Kahi, Hawaii Charlotte Nakata 808/537-5678 hawai@earthlink.net

ART & SCIENCE OF OPTOMETRIC CARE JOE CLINICAL CURRICULUM Optometric Extension Program Foundation November 6-10, 2008 Grand Rapids, MI Theresa Kreji 800/407-0370 theresa@cep@arizona.net www.cep.org

WISCONSIN OPTOMETRIC ASSOCIATION 2008 PRIMARY CARE SYMPOSIUM November 7-8, 2008 Kohler Resort & Waterpark Wisconsin Dells, WI Jolen Breunig 800/678-5357 jklen@woa-eyes.org www.woa-eyes.org

East-West to include Neuro-Optometric rehab track

Optometric professionals from across the Midwest will converge on the annual East-West Eye Conference from Oct. 2-5 in Cleveland, Ohio.

The conference is sponsored by the Ohio Optometric Association, along with support from the New York State Optometric Association.

The conference will feature a special track on neuro-optometric rehabilitation. The track will include practical ideas, case presentations and discussion on evaluating the handicapped patient, understanding the brain-injured patient, exploring unique uses for partial occlusion, managing perceptual anomalies to aid rehabilitation, and working with the uncooperative patient.

Other education for doctors and staff includes tracks in special areas such as pediatrics, contact lenses, glaucoma, low vision, billing and coding, systemic, posterior and anterior segment disease, and practice management.

The conference also hosts an exclusive party at the Rock and Roll Hall of Fame with entertainment by the Bad Habits on Friday, Oct. 3.

For more information, visit www.eastwesteye.org, email info@ooa.org or call 800-999-4939.
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• Opportunity to work with colleagues and create new programs
• Growing department now features Pachymetry, OCT, Fundus Photography, HVF and offers Fluorescein Angiography with in-house eyewear/contact lens department

For more information, please contact Autumn Kline, Physician Recruiter, at 1-800-845-7112, email: aunskline@geisinger.edu or visit www.join-geisinger.org/389/Optometry

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Great Western Council of Optometry

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Interested applicants should submit a letter of intent and current CV electronically to:

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Chair, Optometric Search
Section of Ophthalmology
Dartmouth-Hitchcock Medical Center
One Medical Center Drive, Lebanon, NH 03756
E-mail: Peter.G.Lapre@hitchcock.org

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American Optometric Association

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Professional, principle-centered, multisite cataract and laser company seeking candidate. Company seeks optometrist for Clinical Director in the western states. Excellent growth potential. Excellent work environment including unique approach between staff ODs and surgeons with a strong management and support. Ideal candidate will be residency trained in cataract and surgical corneal management with at least 3 years experience in like setting. Must have leadership and exceptional communication skills and be clinically independent. Excellent compensation and benefits package. Send CV and letter of interest to Dr. Cindy Munn at cindy.munn@pol.com

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Exceptional private practice opportunity available in affluent metro Denver. Colorado. Complete optometric and outsourcing lab. Located in a busy retail area. Price reduced to $195,000. 100% buy back incentive. MOTIVATED Seller. Contact: info@24eyes.com or call 720 396 2200.

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SELLERS NEEDED FOR BUYERS SEEKING PRIVATE PRACTICES in Ohio and Florida. Contact Sandra Kennedy at National Practice Brokers (800) 201-3958.

ST. LOUIS, MO - FULL TIME OPTOMETRIST.
Full time optometrist needed for private practice in St. Louis. Highly progressive practice, state of the art equipment. Latest in technology, full scope eye care. Excellent benefit package and gross salary. Please forward CV and inquire via email to: jschwartzch@charter.net

Virginia, Roanoake Metro Area Optometrist F/T, full time and part time. Guaranteed salary and benefits. Excellent benefit package. Email resume to: charlottesville@riverdaleeye.com

OPTOMETRIST — Portland, Maine area. Full time leading to partnership in large privately owned optometric practice. Office fully equipped with ODs, OCT, topography, OCT, digital imaging, digital camera, pachymeter and on-site optical fabrication lab including cast molding and surfacing. Call or email Cynthia Johnson, Eye Care & Vision Center, P.C., 101 Main Street, Westbrook, ME 04092, (207) 874-1801, www.eastcoastoptometry.org

OPTOMETRISTS NEEDED NATIONAL

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t needs associate/partner. Email vita with cover letter to seniorod@comcast.net

ST. LOUIS, MO- FULL TIME OPTOMETRIST.
Full time optometrist needed for private practice in St. Louis. Highly progressive practice, state of the art equipment. Latest in technology, full scope eye care. Excellent benefit package and gross salary. Please forward CV and inquire via email to: jschwartzch@charter.net

One of the leading reasons worldwide for blindness is the simple lack of a pair of glasses. VOSH (Volunteer Optometric Services to Humanity) is dedicated to battling this problem. The organization has made Nicaragua, the poorest country in Central America, a priority this year. In addition to a number of clinics that VOSH has run in poor rural areas of the country, they are establishing a lens processing lab in poverty-stricken northern region of the country. VOSH is asking all U.S. optometrists to check their in-office labs for any excess single vision or obsolete uncut plastic lenses they might be willing to donate to the cause. We need single vision or spherical bifocal plastic lenses. Our lab cannot process glass lenses so those are not needed. VOSH is also accepting new unused spectacle frames for use in the lab. Please call 800-300-4590 to arrange free UPS ground shipment of your unused inventory. These lenses could make a poor Nicaraguan see and become a more productive member of society. VOSH also is soliciting donation of used optical equipment to equip clinic sites. Contact Information can be found on www.vosh.org.

VOSH INTERNATIONAL NEEDS YOUR UNNITIALIZED EYE GLASSES. How would you like to donate your outdated equipment to a worthy cause that will change a life for the better at the same time? VOSHINTERNATIONAL.com with the support of WCO and UNESCO has embarked on a program of equipment/technology transfer to flodging Optometry programs in South America and Africa. This is being done with a new partner, MEDEC International (MEDEC International Medical Equipment Collaborative); a non-profit 501c3 that gathers, services, cleans and packages entire eye clinics, hospitals and other medical facilities and ships them to an organization that gives them a second life.

Please look through your garage, closets, basements, for all your outdated, broken, unwanted, unneeded, used, old stock, or obsolete uncut plastic lenses or single vision. VOSH will accept used plastic lenses or single vision. VOSH will accept used plastic lenses or single vision.

Exportation, Sales, Leasing and Renting

Classified Advertising Information

Effective the October 9, 2006 issue onwards, Classifieds advertising rates are as follows: 1 column inch = $60 (40 words maximum) 2 column inches = $110 (80 words maximum) 3 column inches = $150 (120 words maximum). This includes the placement of your advertisement in the classified section of the AOA Member Web site for two weeks. An AOA box number charge is $30.00 and includes mailing of responses. The envelope will be forwarded, unopened, to the party who placed the advertisement. Classifieds are not commissiionable. All advertising copy must be received by e-mail at k.spurlock@elsevier.com. Classified Advertising. You can also mail the ads to Elsevier, 360 Park Avenue South, 9th Floor, New York, NY 10010.

Advertisements may not be placed by telephone. Advertisements must be submitted at least 30 days preceding the publication. All ads must be submitted by the AOA – do not assume your ad is running unless it has been confirmed. Cancellations and/or changes MUST be made prior to the closing date and must be made in writing by the AOA. No phone cancellations will be accepted. Advertisements of a “personal” nature are not accepted. For all other ads please contact AOA NEWS or use online classifieds (at www.promed-financial.com) and posting on the Web site will coincide with the AOA NEWS publication dates. Contact Sandra Kennedy at Elsevier ad sales contact - at 212.633.3986 for advertising rates for all classifieds and rates ads.

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BLEED LINE
Calendar
from page 18

NORTH CAROLINA STATE OPTOMETRIC SOCIETY
FALL EDUCATION CONGRESS
VISION EXPOSITION
November 7-9, 2008
Asheville, NC
Sue Gardner
NCYEYECARE@aol.com

MASSACHUSETTS SOCIETY OF OPTOMETRISTS CE
November 9, 2008
Best Western Royal Plaza Hotel,
Marlborough, Massachusetts
Richard Lawless
508/875-7900
FAX: 508/875-0010

VT / VISUAL DISFUNCTIONS (CEP CLINICAL CURRICULUM)
Optometric Extension Program
Fondren Hall
November 12-16, 2008
Phoenix, AZ
Theresa Keji
844/470-0370
Theskeji@cepviseron.net
www.cep.org

WEST VIRGINIA OPTOMETRIC ASSOCIATION ANNUAL CONGRESS
November 13-16, 2008
Charlestown, West Virginia
866/2055997
www.wvoa.org

ARIZONA OPTOMETRIC ASSOCIATION 2008 FALL CONGRESS
November 14-16, 2008
Hilton, Sedona Resort and Spa,
Sedona, Arizona
Jennifer Parker
602/279-0055
FAX: 602/264-6356
Jennifer@azoa.org
FAX: 602/264-6356
800/346-2020
602/279-0055
Jennifer Parker
Sedona, Arizona
Hilton Sedona Resort and Spa,
November 14-16, 2008

AZOA THE RADISSON DALLAS LOVE FIELD
November 15-16, 2008
2008 EYECON
PEIVC.com
866/379-6235
800/346-2020
602/279-0055

THE HEART OF AMERICA CONTACT LENS SOCIETY CONTACT LENS AND PRIMARY CARE CONGRESS
February 12-15, 2009
Hyatt Regency-Crown Center,
Kansas City, MO
Dr. James B. Smith
918/341-8211

Registration: 302/327-2736

TROPICAL CE
ST. MAARTEN
FEBRUARY 14-21, 2009
SCHNITZER GREAT BAY BEACH RESORT & CASINO
ST. MAARTEN
Sue Auvray
281/808-5763
281/900-6493
www.TropicalCE.com

INDIANA OPTOMETRIC ASSOCIATION OCTOBER PHARMACOLOGY SEMINAR
February 18, 2009

AOA "BUILDING THE PAPERLESS PRACTICE" ELECTRONIC HEALTH RECORDS CONFERENCE
Feb. 21, 2009,
San Francisco, CA
www.aoa.org

SECO INTERNATIONAL SECO West Congress
March 4-8, 2009
Georgia World Congress Center,
Atlanta, GA
www.seco2009.com

AOA:
North Carolina State Optometric Society
Fall Education Congress Vision Exposition
November 7-9, 2008
Asheville, NC
Sue Gardner
NCYEYECARE@aol.com

MASSACHUSETTS SOCIETY OF OPTOMETRISTS CE
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918/341-8211
SUSTAINED LEVELS OF CONCENTRATION

Delivering concentration above and below the ocular surface¹⁻³

IQUIX® is indicated for the treatment of corneal ulcers. The ocular adverse events occurring in 1%-2% of patients included decreased/blurred vision, instillation site irritation/discomfort, ocular infection, and ocular pain/discomfort. The non-ocular adverse events occurring in approximately 8%-10% of patients were headache and taste disturbance. IQUIX® solution is contraindicated in patients with a history of hypersensitivity to levofloxacin, to other quinolones, or to any of the components in this medication.

References:

Please see brief summary of full Prescribing Information on the next page.

IQUIX® is a registered trademark of Daichi Sankyo Co., Ltd., Tokyo, Japan. Manufactured by Santen Oy, Tampere, Finland. Marketed by VISTAKON® Pharmaceuticals, LLC, Jacksonville, Florida. VISTAKON® is a registered trademark of VISTAKON® Pharmaceuticals, LLC.

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For more information, visit www.IQUIX.com

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