

**OPTOMETRY SERVICE
CONFERENCE CALL**

AGENDA

May 21, 2010

3 p.m. Eastern Time

1 (800) 767-1750, Access Code: 16019

1. Announcements:

- a. Open VA Optometry Staff Positions
<http://www.vacareers.va.gov/index.cfm>
 - i. Dr. Townsend comment. There is a full time, optometrist position in White City, OR, Fresno, CA and Martinsburg, WV. Check the website above for the latest listings.

- b. VA Health Care Fact Sheet 16-14, April 2010
http://www.navao.org/documents/05_21_2010/Health_Care_ReformFactSheet1614.pdf
 - i. This fact sheet answers questions about the new health care reform law. Nothing in the new law changes anything about VA health care. Beginning in 2014, everyone will be required to have health care coverage. Enrolled veterans do not have to purchase additional coverage.

- c. Employee Notice: Federal Employees Health Benefits Program for Children up to Age 26, May 13, 2010
http://www.navao.org/documents/05_21_2010/Employee_Note_Coverage_for_Children_up_to_Age_26_under_FEHB.doc
 - i. Dr. Townsend comment. This notice is to inform employees that, under the Affordable Care Act, adult children up to age 26 will be eligible for health insurance coverage at the start of the next benefit plan year. The effective date of this provision is the first day of the plan year that is six months following the enactment of the law (ie Jan 1, 2011 for FEHB program).

- d. Major Charles R. Soltes, Jr., O.D. VA Blind Rehabilitation Center
http://www.navao.org/documents/05_21_2010/Soltes_Senate_Bill.pdf
 - i. This bill is requested to designate the Department of Veteran Affairs blind rehabilitation center in Long Beach, CA, as the "Major Charles Robert Soltes, Jr., O.D. Department of Veterans Affairs Blind Rehabilitation Center.

- e. VHA Directives 2010-018, 1020, and 2010-023
http://www.navao.org/documents/05_21_2010/VHA_Directive_2010-018_Facility_Infrastructure_Requirements_to_Perform_Standard_Intermediate_or_Complex_Surgical_Procedures.pdf
 - i. Directive 2010-018 is intended to establish policy and guidance regarding the infrastructure requirements for VHA facilities providing in-house

surgical services in relationship to standard, intermediate, or complex surgical procedures as well as the method for monitoring compliance.

1. Dr. Townsend comment. When you get into corneal transplants, retinal surgery, exploration and excision, and decompression of the orbit, there has to be an intermediate structure available.
 - ii. Directive 1020 is issued to implement the Department of Veteran Affairs employee incentive scholarship program authorized in Title 38.
http://www.navao.org/documents/05_21_2010/VHA_Directive_1020_Employee_Incentive_Scholarship_Program.pdf
 1. Dr. Townsend comment. He receives emails from VA employees interested in going to optometry school. The VA partners with its employees to further develop themselves. Optometry falls under this directive for current employees.
 - iii. Directive 2010-023 provides specific policy on what steps must be taken to ensure that all surgery and invasive procedures performed in the clinical setting are performed on the correct patient, at the correct site, and with the correct implant, if applicable.
http://www.navao.org/documents/05_21_2010/VHA_Directive_2010-023_Ensuring_Correct_Surgery_and_Invasive_Procedures.pdf
- f. VHA Handbooks 1172.04, and 1020
- i. The 1172.04 Handbook defines the procedures for development and implementation of the Individualized Rehabilitation and Community Reintegration Care Plan for Veterans and military service members who receive inpatient or outpatient rehabilitative care for functional deficits or needs related to Traumatic Brain Injury (TBI) and polytrauma.
http://www.navao.org/documents/05_21_2010/VHA_Handbook_1172.04_HK_5-3-10.pdf
 - ii. The 1020 Handbook provides specific direction, guidance, and procedures related to the operation of the Employee Incentive Scholarship Program (EISP) at the Department of Veterans Affairs (VA) health care facilities. The purpose of the EISP is to assist VHA in meeting its needs for qualified health care staff in occupations for which recruitment or retention is difficult.
http://www.navao.org/documents/05_21_2010/VHA_Handbook_1020_Employee_Incentive_Scholarship_Program_EISP_Procedures.pdf
- g. Implementation of IL 10-2010-007, Under Secretary for Health's Information Letter: Visual Impairment Prevention for Veteran Patients
http://www.navao.org/documents/05_21_2010/IL_10-2010-007_Visual_Impairment_Prevention_in_Veteran_Patients.pdf
- i. Dr. Townsend comment. Last week, information was sent out to all VA optometrists. There will be follow up information early next week about what every VA medical facility needs to do and its action plan for implementation dealing with the care coordination agreements from primary care to optometry/ ophthalmology
http://www.navao.org/documents/05_21_2010/Care_Coordination_Agreement_Primary_Care-Eye_Care_Draft_Document_05-10-2010.doc
http://www.navao.org/documents/05_21_2010/Care_Coordination_Agree

[ment Eye Care Provider-Eye Care Specialist Draft Document 05-06-2010_2.doc](#)

In those documents they talk about the exam for diabetic retinopathy. If the patient qualifies for the tele-retinal imaging program, that will satisfy the requirements. Included are the care coordination agreements between optometry and ophthalmology

http://www.navao.org/documents/05_21_2010/EyecareQualityCareReview-AMD_05-06-2010.doc

http://www.navao.org/documents/05_21_2010/EyecareQualityCareReview-DIABETES_05-06-2010.doc

http://www.navao.org/documents/05_21_2010/EyecareQualityCareReview-GLAUCOMA_05-06-2010.doc

- ii. Dr. Townsend had a question from a CBOC who states they refer their patients out to local communities. Examples were given for the care coordination agreements that can be modified to meet your local needs but should include those following areas. There is also going to be information about making sure there are ongoing, periodic professional practice evaluations and periodic, clinical pertinence reviews, joint meetings between optometry and ophthalmology also ensuring we are educating the primary care providers about these risk factors.
- iii. Dr. Maino comment about the coordination of care and other directives about how ophthalmology and optometry conducts their peer reviews. Concerns were setting back this relationship between ophthalmology and optometry 30 years.
 1. Dr. Townsend comment. This issue is a “two way street”. Optometry will be conducting its own, ongoing, professional practice evaluations as will ophthalmology and then we are supposed to see if we are meeting our own care coordination agreements in providing timely referrals.
 2. Another comment about the wording in the memo/ information letter dealing with the appropriateness of the diagnosis and treatment of those patients only seen by optometry. The commenter is certain that is still a major concern with having optometry only reviewed and with ophthalmology not being reviewed with their appropriateness particularly when it comes to glaucoma.
 3. Dr. Townsend comment. Optometrists perform the predominate amount of eye care in the VA: 2 out of every 3 veterans are seen by optometry. This letter is not excluding ophthalmology from the review process. The joint sessions are there to review, both, optometry and ophthalmology. These sessions are there to see how we can all improve care.
 4. Comment made. At their facility, the chief of staff at that facility interpreted as only optometry was to be reviewed.
 5. Dr. Townsend comment. If that is how it is being interpreted then the concern should be sent to VA central office through the normal chain of command and a request for clarification should be made.

The Chief of staff should go through the facility director then VISN leadership and forward to VA central office.

- iv. Dr. Townsend comment. The implementation memo came out through 10N. There will also be additional guidance coming out from the Undersecretary for Health. There will be a June 10th and June 30th deadline. A suggestion was made by Dr. Townsend that at this point, since the only implementation memo that is out is from 10N which is operations and management, you should go through the chain of command and express your concerns through that venue.
 - 1. Dr. Norden comment. He expresses concerns about the wording in the letter. If read carefully it refers to optometry but does NOT exclude ophthalmology.
 - 2. Comment made that requests need to be made through official channels to obtain clarification.
 - 3. Dr. Vanderzee comment. He interprets the memo as ophthalmology putting a “thumbhold” on the sites that the care is predominately given by optometry.
- v. A question was posed about contract clinics providing optometric care and if they are to be included in the peer review.
 - 1. Dr. Townsend comment about the contract care. They would want to ensure that the care needed was timely and need to be included in the reviews.
 - 2. There needs to be the same quality of care whether it is done in or outside the VAMC.
 - 3. The issue also came up about contracting vs. traveling to the facility and what the costs involved were. The issues to think about was providing the best care for the patient as well as convenience and getting patients seen in a timely fashion.
- vi. Dr. Maino comment. Issue involving care coordination and ophthalmology reviewing optometry.
 - 1. Dr. Townsend commented about how each facility is interpreting that wording and the recommendation was, again, given that clarification needs to be asked through the local chain of command but his understanding was that it involved, both, optometry and ophthalmology that will be reviewed.
 - 2. The concern was also stated that ophthalmologists should be reviewing ophthalmologists and optometrists should be reviewing optometrists.
- vii. Dr. Hitchmoth comment. What steps need to be taken to change the wording on the memo or ask for clarification regarding the memo so it can be implemented appropriately?
 - 1. Dr. Townsend comment. The VA is concerned about quality of care issues stemming from Palo Alto and Ft. Harrison, Montana where there was an ophthalmologist who had falsified medical records according to the Inspector Generals Report. The issues were quality of care and patient safety.

2. Dr. Chiara comment. The anxiety is that the issues that came from one or two facilities are being “thrust” on the rest of the facilities and are going to impact clinical privileges for everyone.
 3. Dr. Townsend comment: There are all sorts of different mechanisms by which you can voice your opinions and concerns and through many different organizations, which is up to each individual VA optometrist. He is imploring all optometrists to go through the appropriate channels at their local facility to obtain clarification on the wording of the informational letter.
 4. A suggestion was made for the NVAO to get involved on these issues.
 5. Another suggestion was made to be prepared to stand up for ourselves locally and it may be of some help to gain understanding of what the VA officials in Washington are faced with. A good example was found on the website vawatchdog.org. Search over the issues concerning optometry and glaucoma and Palo Alto and Montana and what you will see is the summary of local news accounts and information that discusses what happened and how the VA was involved. This will allow us to gain perspective on how an information letter like this comes about. It puts us in a better position to argue the local position.
- viii. Dr. Townsend comment: What the VA is concerned about, whether it be disinfecting scopes, etc, is having checks and balances to ensure the public and veterans we serve have the highest level of care we provide. The VA wants us to practice at our highest level of competence and ability. They want to have the best quality and safety of patient care that we can possibly provide. In order for that to occur in eye care we need to work together as optometrist and ophthalmologists because we cannot succeed in caring for all the veterans’ needs without each other’s support. We need to respect the peer review and OPPE processes, we need to ensure that we are abiding by our agreements (service agreements) and we need to make sure that the care that is being given and veteran data remains confidential. He will relay the concerns that are being expressed today with the wording of the letter to his supervisor.
- h. VHA Office of Public Health & Environmental Hazards, H1N1 Influenza Advisories: <http://vaww.vhaco.va.gov/pubhealth/swineflu/index.htm>
2. Optometric Education Programs - Drs. Grimes/Messer
 - a. Dr. Townsend comment. He believes all the VA residency positions have been filled. If you have positions that are not filled (residency or research positions), please contact him or Kathleen Gernhart. They can always transfer that position to another facility for one year and it will be transferred back to you the following year.
 3. Optometry Field Advisory Committee - Dr. Horn
 - a. Dr. Horn comment. There is nothing new to discuss.
 4. Optometry Recruitment Representatives - Drs. Bennett/Gay

- a. Dr. Gay comment. Nothing new to report. There are about 39 people nationally involved. They are still looking for representatives and if interested, please email Dr. Gay for a power-point presentation and to act as a contact for those interested in learning more information about optometry in the VA setting.
5. Infection Control/Reusable Medical Equipment Reprocessing - Drs. Horn/White
 - a. Dr. Horn comment. Reusable medical equipment is still a “hot issue” and Dr. White has been nominated to serve on a national field advisory committee for SPD. He will be starting next week.
 - b. Dr. Horn comment. Reminder: check the date of the S.O.Ps. They need to be updated annually and the competencies also need to be updated.
6. Teleretinal Imaging Program - Drs. Cavallerano/Selvin
 - a. Dr. Townsend comment. There was a meeting in St. Louis last week looking at the successes we have had in tele-retinal imaging program. They are looking at validating studies in the future to screen for macular degeneration and glaucoma. It was a very successful meeting.
7. DoD/VA Vision Center of Excellence & Eye Injury Registry - Dr. Townsend
 - a. Dr. Townsend comment. They are still awaiting the final approval for the optometrist who will serve as the Vision Center of Excellence research optometrist. Hopefully by the next conference call he will be able to announce the selected individual.
8. TBI Vision Rehabilitation - Drs. Gagnon/J. Kirby: unavailable for comment.
9. Low Vision Rehabilitation - Drs. Fuhr/Gagnon/Mancil: unavailable for comment.
10. Optometry Quality Improvement – Dr. Norden
 - a. Dr. Norden comment. They have not gone through a more intense process where their supervisors determine clinical privileges. He suggests that everyone needs to document a systematic process in deciding clinical privileges for new employees and renewals for current employees. Currently this process can take 4-6 months. They are supposed to review documentation that justifies renewal of these privileges. Our contribution to this process is to provide that data analysis.
 - b. His suggestion is that we should not just send data up to our service chiefs without arriving at our own recommendation. If they misunderstand or make the wrong decision, then by directive, it will automatically go to the national practitioner data bank and the individual’s state board of optometry, which can cause adverse effects. The service chiefs should just be giving a yes or no response on your own decision for privileges.
11. VA Systems Redesign/Wait Times - Drs. Belkin/Ficarra
 - a. Dr. Ficarra comment. There is nothing new to report.
12. VA Research Announcements & Solitations - Dr. Mancil – unavailable for comment.
<http://vaww.research.va.gov/news/announcements/default.cfm>
http://vaww.research.va.gov/funding/solicitations/default.cfm#All_ORD
13. VHA Optometry Service Websites - Drs. Cordes/Ficarra/Hamilton
 - a. Dr. Ficarra comment. They are about to promote the new website. There are a couple things that need to be addressed in the old website in terms of the

directories. They are working hard to get it promoted by next Friday (intra and internet).

14. VA Optometry Service Directory - Drs. Egusa/Lim/Pewitt – unavailable for comment.
15. VA Residency Trained Optometrist Directory - Dr. Wang – unavailable for comment.
16. AFOS Report - Dr. Wasik
 - a. Dr. Wasik comment. The new website is up at afos2020.org. It is very user friendly and updated from the past. Please log in using your username and password that was located on your last newsletter; otherwise, you can contact AFOS by phone or email for a temporary username and password. You can update your own profile, pay dues, add a picture, etc. There is another section called AFOS2020forum.org. This is a way to express any concerns you have and you can email Dr. Wasik with things to be posted. They are also coming out with a survey about changing the annual meeting before academy so more VA and Indian Health optometrists can participate in some of the voting.
 - b. FFO registration is on the website. You can register for the Westin Hotel at the government rate on the website as well.
 - c. AFOS has a delegate representative at the AOA meeting, so if you are planning to go to the AOA meeting and are an AFOS member, please contact the number listed on the website. They need people for Thursday from 10am – 3:45.
17. NAVAQ Report - Drs. Chou/Kawasaki/Storer
 - a. Dr. Storer comment. NAVAQ will most likely be contacting AFOS to discuss earlier issues and what response they may be able to assist us with.
 - b. Please mark your calendars for the annual dinner meeting which will be held the evening of Thursday, November 18, 2010 at the InterContinental Hotel in San Francisco in conjunction with the American Academy of Optometry meeting. Please stay tuned for more details as the date gets closer.
 - c. Registration for this year's ACMO exam as been **EXTENDED** to **May 31, 2010**. The NAVAQ strongly encourages all eligible candidates to register for this year's ACMO administration on Friday, June 4, 2010. Also, the NBEO has recently expanded the eligibility criteria for this exam. Please visit their website at www.optometry.org for details.
 - d. The summer issue of the NAVAQ newsletter, Optimum VA, will be coming out soon. Dr. Tomasini is requesting submissions by June 30, 2010. She is requesting any announcements in our *Keeping In Touch* section, which include personal and profession announcements for our members.