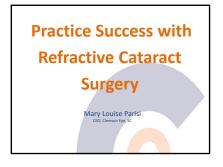
ASCRS • ASOA Symposium & Congress Technicians & Nurses Program

May 6-10, 2016 – New Orleans









A Successful Refractive Practice

- All staff involved in the process
- Enthusiasm & Consistency
- Educated patient
- Involved referral network
- Clear surgeon recommendation
- Document Patient Satisfaction
- Avoid Problems









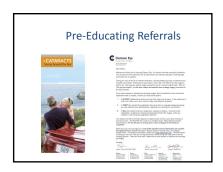














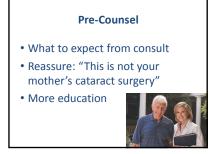




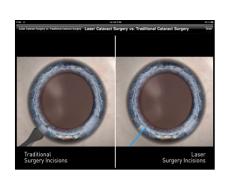






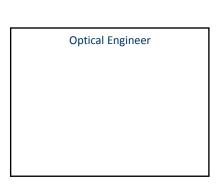






Lifestyle Focus Patient Lifestyle Questionnaire Occupation? Hobbies, recreational activities? Computer frequently? Reading or close detailed work? LASIK, mono-vision CLs, progressives? Would you like to have less dependence on glasses after surgery?











Identify Refractive Candidates

- Listen for patients who "hate" glasses
- Healthy eyes except for cataracts
- Astigmatism

During history...

"What activities would you like to be able to do after cataract surgery? I see you are an avid scrapbooker"

"This test (IOLM/CT) shows you have a lot of astigmatism (define). We can now fix that for you with an advanced lens implant."

DVD during Dilation



- Techs set it up
- Powerful videos:
 Alcon
- Our testimonials



A Clear Statement



"I think you're a great candidate for an advanced lens."

Personal connection...



"I see you love quilting. This is your opportunity to have lens implants that will help you enjoy that." You are special because...



"Not everyone is a candidate, but you are well-suited for these select lenses."

Less restrictions...



"Would you prefer more or less restricted vision after cataract surgery?" Best Vision...



"You will likely have better vision than you've ever experienced before with the astigmatismcorrecting lens implant." Emphasize that...



"We are only doing this once. This is your one chance to choose the lens that you want in your eye(s) everyday for the rest of your life.





Never prejudgesConfirms value

Private room & include family/friends















Life transforming choice...

"Turn back time. Return to doing the things you love."

"If you were my brother, I would want you to have this lens."

"As we age physically, it's important to have the best vision possible."



Canterbury Farms, SC



"But, I've worn glasses all my life!"

> "I don't mind glasses."

"NOW you don't have to wear them for life. You have a choice"

"Our happiest Full-focus patients have worn glasses since childhood."

"Is showering or getting up at night

Ask any optician how hard it is to satisfy most patients



"Now you can get your 30 yo eyes back."





Comfort Talking Money

- "This is an opportunity that affects your vision for the rest of your life. Take your time with it."
- "Consider what you will spend on glasses for life
- "The good news is the government covers the basic costs and you have the opportunity to upgrade."

Elective Spending (annual)

- Hearing Aides (invisible)
- Dentist

\$4000 \$3000 • Teeth Whitening \$1000 \$1000

- · Aesthetics: Botox • Veterinary Bills
- \$3000 • Cable TV
- Sports? Travel? Vehicles?



Advanced Service Fees (per eye) ☐ Full-Focus Lens Exchange \$190/month \$5,000.00 ☐ Full-Focus CATARACT SURGERY \$110/month \$2,500.00 ☐ Astigmatism-Correction CATARACT SURGERY ☐ BASIC CATARACT SURGERY N/C

Potential Problems with Refractive **Cataract Surgery**

Best Practices

- Transparency clearly inform patients of financial responsibility: for what, how much, why, and when
- Documentation use a financial waiver, ABN or similar instrument to document financial responsibility
- Separation segregate professional and facility fees and monies
- Compliance follow CMS guidelines, and recommendations of AAO & ASCRS

Payments (2-Aspect Rule)

- Cataract surgery (covered) - Surgeon, facility fee, IOL
 - A) Patient: deductible, copayments
- Refractive services (noncovered)
- B) Patient: Patient Shared
 Responsibility
- Patient Responsibility:
 - A + B = Patient out of pocket



Refractive Cataract Surgery Covered Cataract surgery Cataract surgery Refractive testing ATIOL, Laser LRI covered

Patient shared billing: covered & non-covered services LRI – Limbal relaxing incisions, refractive keratoplasty

Refractive Cataract Surgery Assigned Covered Assigned Non-Patient Pays Patient Pays covered Patient shared billing: covered & non-covered services LRI – Limbal relaxing incisions, refractive keratoplasty

Ways to Avoid Problems

- Careful patient selection
- Document lifestyle (e.g., loves near vision)
 Manage expectations (healing time, post-op
- vision) and realize that when patients are paying for refractive surgery, the overall expectations are higher.
- Do not promise that patient will be glasses free, especially with laser cataract surgery. FS laser arcuate incisions are no guarantee of astigmatism reduction.
- Ensure comanaging optometrist returns any unhappy patient to surgeon.

Manage Expectations

- Educate all patients in advance that multifocal works best in both eyes. After the first surgery, they may experience some doubt and disappointment.
- Confirm that laser cataract surgery is <u>not</u> guaranteed to eliminate all astigmatism and might need glasses in the future.
- Set the expectation that healing takes time!
- If patient is extremely anxious, have them return often until you work through the challenge

Medical Pointers

- Address, prior to cataract operation, that further refractive surgery might be required ($\emph{e.g.}$, IOL exchange, LASIK) and who pays it.
- Look for medical issues that might compromise results (e.g., DES, AMD, etc.) Address them.
- · Get good results and make it right with the patient if the results are an (unpleasant) surprise or undesirable.

Myopes Love Near Vision

- Listen to patient's goals for surgery.

 Remember most myopes love their near
- Patient may prefer option to remain myopic and wear glasses for distance, if multifocal is not an option.

Residual Astigmatism

- Train counselors about astigmatism correction options.
- Educate patient about astigmatism correction options. Toric lens is more precise, particularly >1 D. Residual astigmatism may need further correction.
- Avoid surprises. Identify cost of LASIK treatment (if needed) prior to cataract surgery or ideally, build into pricing.

IOL Exchange

- Do not bill for IOL exchange for refractive reasons. Build the cost of all postop care (including lens exchange) into your pricing models
- Informed consent should always include the possible need for a lens exchange.

Unhappy Refractive Patients

- Consider an occasional refund as the "cost of doing business." Refunds are less expensive than legal defense.
- Be vigilant of a patient's disposition and comfort.
 Unhappy patients do not just "go away." They go somewhere: to another surgeon or to a lawyer.
- Realize that when patients are paying for refractive surgery, the overall expectations are higher.

Informed Consent Errors & Omissions

- Informed consent must be performed orally (by surgeon) and in writing for the appropriate lens implant selection. Patient lens changes must communicated and well documented in record to ensure correct lens implanted
- You cannot perform 2nd eye surgery based on the initial eye exam...Surgeon and practice must not neglect to obtain Informed Consent for 2nd eye.
- Informed Consent is per eye.
- Optometrist cannot provide medical necessity, nor informed consent.

Insurance Pays for Refractive Cataract?

- They might, but very little, so you must obtain prior authorization from Medicare Advantage plans (Medicare Part C).
- Medicare Part C will soon be 50% of all Medicare Plans
- Must declare the refractive cataract a non-covered service and beneficiary is financially responsibility.
- Realize that when patients are paying for refractive surgery, they try to shift financial responsibility.
- Don't proceed with surgery until other third party payers have clearly stated who is responsible for what.

Before Coding, Consider Coverage **Consider Covera

Part C Medicare

- Get prior authorization
- Obtain a determination of benefits for each patient
- Don't use ABN form use MA Plans financial waiver form
- Don't pretend that Part B and Part C are identical.
- Don't deploy "caveat emptor".



