

JUNE 2019

Beautiful Bermuda, Myopia Management and Creating Connections



Kerry Gelb, OD
President

Pack your Bermuda shorts! The stage is being set for the 2019 Annual ALLDocs Meeting.

Fairmont Southampton is perched on Bermuda's stunning south shore with miles of pink sand beaches alongside a private beach club, dotted with lush bougainvillea and towering coconut palms. The luxurious Fairmont Southampton, Bermuda beach, tennis and golf resort serves island adventure and relaxation. The resort also features the 18-hole par-3 championship Turtle Hill Golf Club*

Bermuda and its surrounding areas offer countless recreational activities including **Cave Exploration, Nature Walks, The Bermuda Rum Tour, bike riding, snorkeling and shopping.** This year's venue is sure to please.

So, join us for another exciting annual meeting where you can network with colleagues, earn continuing education credit, learn something new and enjoy the beauty that is Bermuda!

Myopia Management

This year ALLDocs commits to aiding our members in myopia management efforts. Myopia is becoming a worldwide epidemic and in true ALLDocs fashion we remain ahead of the curve. Working with our partners to provide the education and practice management resources to create a practice within a practice for our myopic patients to meet their needs. At the



PRESIDENT'S DESK

Annual Meeting Dr. Liu's lecture was informative and Dr. Despotidis was motivating to say the least. We are all excited to see the progress of our group in this area.

Stay Connected

If you have not already liked the ALLDocs Facebook page, make sure you do so! Important messages are shared with the group from The Board and from our loyal sponsors. Be the first to know about meeting information and exciting updates.

Join the ALLDocs Discussion Forum- MEMBERS ONLY. A place for ALLDocs members to share ideas, ask for advice, and hang out when we're not hanging out at the annual meeting. Because of our unique business situations, this group will be limited to members of ALLDocs who are current on their dues and is open to doctors only.



Connect your Staff too!

Have your Office Managers join the **ALLDoc's Managers** Facebooks Page. This Facebook Page is a great tool for your managers to get and stay connected. The managers share tips and advice and offer each other great solutions and advise. The planning for the Managers Meeting is underway. Members of this Facebook page will be the first to know when the announcement is made! **Contact Sammy (Safet Hyse-naj) Sammy@drhults.com to be added to the group.**



GALLERY



Registration Open!
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New Data on Atropine Drops for Myopia Progression



The prevalence of myopia worldwide has increased over the past few decades, especially in children. Recent studies predict that approximately half of the world's population will be myopic by the year 2050 and as many as 10% will be highly myopic.¹ Considering the broad scope and burden of the condition, efforts to find safe and effective methods to prevent myopia progression are of critical importance.

Atropine eye drops have emerged as an effective therapy to help manage the progression of myopia, but their efficacy and optimal concentration dosage remain uncertain. Recently, lower-concentration atropine eye drops have been found to be effective in slowing myopia progression in children.

The ATOM 2 Trial

The Atropine for the Treatment of Myopia 2 (ATOM 2) trial found that 0.5%, 0.1%, and 0.01% atropine slowed myopia progression over a period of 2 years in children aged 6 to 12 years. With fewer side effects and rebound after terminating the drops, the ATOM 2 study authors suggested that 0.01% atropine had a better treatment-to-side effect ratio.²

After the ATOM 2 study, use of low-concentration atropine 0.01% surged in popularity,³ but researchers from the study cautioned that the trial was limited by the lack of a placebo group. Another important limitation was the fact that there was no significant difference in axial length elongation between groups receiving various concentrations of atropine and its effect on myopia control.²

The LAMP Study

In a recent issue of *Ophthalmology*, data

from the Low-concentration Atropine for Myopia Progression (LAMP) study were published. This randomized controlled trial evaluated the efficacy and safety of low-concentration atropine eye drops at levels of 0.05%, 0.025%, and 0.01% over a 1-year period in children aged 4 to 12 years with myopia.

All three of the lower-concentration atropine eye drops reduced myopia progression and were well-tolerated in the LAMP study, with no observed adverse effects on vision-related quality of life. Of the three concentrations used, the researchers observed a clear concentration-dependent response, with 0.05% atropine performing better than 0.025% and 0.01% atropine.⁴

Key Caveats

The LAMP study investigators noted that the difference of axial length changes between the 0.01% atropine and placebo groups in the pairwise comparison was not significant, a finding that was consistent with the axial length results from the ATOM 2 trial. This means that accommodation was affected in higher atropine concentrations. Future studies will collect longer-term safety and efficacy data to determine the optimal concentration of atropine. In addition, researchers will explore if atropine can be safely discontinued once myopia progression is under control. In the meantime, the LAMP study provides important new evidence for low-concentration atropine as a safe and effective intervention against myopia progression in children. The LAMP study showing no difference in axial length between 0.01% and placebo means that we should be cautious of only prescribing 0.01% and perhaps need a higher concentration in our pediatric patients for the effect that atropine has on slowing down myopia.

SOURCES

- Holden BA, Fricke TR, Wilson DA, et al. Global prevalence of myopia and high myopia and temporal trends from 2000 through 2050. *Ophthalmology*. 2016;123:1036-1042.
- Chia A, Chua WH, Cheung YB, et al. Atropine for the treatment of childhood myopia: safety and efficacy of 0.5%, 0.1%, and 0.01% doses (Atropine for the Treatment of Myopia 2). *Ophthalmology*. 2012;119:347e354.
- Mezer E, Zlot O, Farzavandi SK, et al. Current trends to decrease myopia progression survey: an IPOS Global Study. In: International Strabismological Association (ISA)/ American Association for Pediatric Ophthalmology & Strabismus (AAPOS) Joint Meeting. Washington, DC: International Strabismological Association; 2018.
- Yam JC, Jiang Y, Tang SM, et al. Low-concentration atropine for myopia progression (LAMP) study: a randomized, double-blinded, placebo-controlled trial of 0.05%, 0.025%, and 0.01% atropine eye drops in myopia control. *Ophthalmology*. 2019;126:113-124.



3D Bioprinting of the Corneal Stroma



Corneal transplantation is a leading treatment for severe loss of corneal function, but efforts are being made to develop corneal prostheses due to limitations associated with these transplants. In clinical research, 3D bioprinting has been harnessed to fabricate biologic tissue for various applications.

In a recent study, investigators applied this approach to corneal tissue engineering in order to construct corneal structures that resembled those of humans with the help of 3D models and suitable support structures. The authors demonstrated a proof-of-concept for using 3D bioprinting as a rapid and effective way to manufacture human corneal substitutes from low viscosity bio-inks.

To successfully realize this approach, the researchers noted that sustained efforts are necessary to facilitate long-term matrix remodeling. This would help validate clinical suitability. In all, the study findings demonstrated great promise for using 3D bioprinting to engineer corneal tissues in the future.

SOURCE

Isaacson A, Swioklo S, Connon CJ. 3D bioprinting of a corneal stroma equivalent. *Exp Eye Res*. 2018;173:188-193. Available at: <https://www.sciencedirect.com/science/article/pii/S0014483518302124?via%3Dihub>.



BUSINESS



Taking Inventory of Your HIPAA Checklist

In addition to the demands of providing quality patient care, competition from discount websites, and the challenges of building a thriving business, optometrists must also safeguard their business by being compliant with federal laws of the Health Insurance Portability and Accountability Act (HIPAA). Being well-versed in HIPAA compliance is critical to ensuring that your business stays compliant in today's competitive healthcare marketplace.¹

Launched in 1996, HIPAA focuses on maintaining confidentiality, integrity, and availability whenever a covered entity or business associate (and its subcontractors) creates, receives, maintains, or transmits protected health information (PHI). HIPAA protects the privacy of individual identifiable health information PHI, provides electronic and physical security of health and PHI, and simplifies billing and other electronic transactions.¹

The checklist below can be used to ensure that your practice has an effective HIPAA compliance program in place:²

Have you conducted the following six (6) required annual audits/assessments?*

- ☐ Security risk assessment
- ☐ Privacy assessment (not required for business associates)
- ☐ HITECH subtitle D audit
- ☐ Security standards audit
- ☐ Asset and device audit
- ☐ Physical site audit

Have you identified all gaps uncovered in the audits above?

- ☐ Have you documented all deficiencies?

Have you created remediation plans to address deficiencies found in all 6 audits?

- ☐ Are these remediation plans fully documented in writing?
- ☐ Do you update and review these remediation plans annually?
- ☐ Are annually documented remediation plans retained in your records for 6 years?

Have all staff members undergone annual HIPAA training?

- ☐ Do you have documentation of their training?
- ☐ Is there a staff member designated as the HIPAA compliance, privacy, and/or security officer?

Do you have policies and procedures relevant to the annual HIPAA Privacy, Security, and Breach Notification Rules?

- ☐ Have all staff members read and legally attested to the policies and procedures?
- ☐ Do you have documentation of their legal attestation?
- ☐ Do you have documentation for annual reviews of your policies and procedures?

Have you identified all your vendors and business associates?

- ☐ Do you have business associate agreements in place with all business associates?
- ☐ Have you performed due diligence on your business associates to assess their HIPAA compliance?
- ☐ Are you tracking and reviewing your business associate agreements annually?
- ☐ Do you have confidentiality agreements with non-business associate vendors?

Do you have a defined process for incidents or breaches?

- ☐ Do you have the ability to track and manage the investigations of all incidents?
- ☐ Are you able to provide the required reporting of minor or meaningful breaches or incidents?
- ☐ Do your staff members have the ability to anonymously report an incident?

*AUDIT TIP: If audited, you must provide all documentation for the past 6 years to auditors.

SOURCES

1. Rai N. HIPAA compliance guide for eye care professionals. First Insight. September 4, 2018. Available at: <https://www.first-insight.com/blog/hipaa-compliance/>.

2. American Optometric Association. HIPAA compliance checklist. Available at: <https://compliance-group.com/hipaa-compliance-checklist-download/>.



EDUCATION

Identifying the Best Research Studies



As doctors we often look to research studies to help us improve clinical decision making. There are some key factors to consideration when identifying the best research studies. One key factor is the design of the research. Retrospective studies look back in time and examine exposure to suspected risks. They are cheaper and quicker to complete, but they are also subject to bias and cannot be used to generate a causative effect. Ideally, these analyses provide insights for future studies. Conversely, prospective studies are more expensive and longer to complete, but they have fewer biases and confounding factors. This research is intended to make precise estimates of outcomes or relative risks.

Below is a hierarchy of evidence to keep in mind when identifying strengths and weaknesses of published research:

Stronger

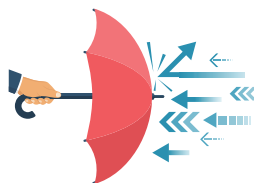


Weaker

- Meta-analysis
- Systematic review
- Randomized controlled trial cohort study
- Case controlled study
- Case series
- Animal research



Insuring Your Practice: Be Prepared!



Beyond medical malpractice insurance, there are other different types of insurance you may want to consider purchasing to protect your practice, including cyber security and business liability insurance.¹

Cyber Security

Cybercrime is bigger problem for optometrists than you may think. As a business owner, you have a responsibility to protect your business records and your patients' personal information. Cybercrime occurs when someone gets illegal access to these records. This includes:

- Hackers or viruses affecting your computers or network.
- Loss or theft of computers or other devices containing records or passwords.
- Paper files that are stolen, mishandled, or disposed of improperly.

Cyber liability insurance offers protection to practices should anything ever happen to your patient records. With this insurance, you are covered for the high costs that can result from any theft or breach of patient or customer data. The insurance provides notification services to help with legal requirements, which can cost up to \$30 per affected record. It also offers services to help respond to an incident and investigate the cause as well as costs of ongoing credit monitoring.¹

Small businesses are frequent targets for cybercriminals, and healthcare providers are often chosen by crimi-

nals because they keep such valuable information on file. Cyber liability insurance can ensure that your practice is prepared to handle the risks that come with modern data storage.

Business Liability

A business owners policy protects your investment. A lot of money is invested in your office, equipment, and inventory. A business owners insurance policy protects all of that and more. It is a convenient package of property and liability protection that is fine-tuned to handle your specific optometry business insurance needs. Some of the types of coverage your practice will have with a business owners insurance policy include:

- *Property*: this covers your building and what you keep inside it, including your equipment, furnishings, and anything you keep on hand or for patients.
- *Business interruption*: if your practice has a fire, break-in, or other event that disrupts your business operations, this coverage makes up for some of your lost income.
- *Liability*: this pays the cost of defending your business in a lawsuit—including paying damages for personal injury and property damage.

On its website at www.aoa.org, the American Optometric Association (AOA) provides more information on these types of insurance and others for its members. The AOA has also partnered with Lockton Affinity to make discounts on malpractice insurance available to students and new graduates that are AOA members.¹

SOURCE

1. American Optometric Association. Available at: <https://www.aoa.org/aoaexcel/business-and-liability-insurance>.



The Disconnect on 1-day Silicone Hydrogels



Although 1-day silicone hydrogel contact lenses have been available for nearly a decade, a recent survey from CooperVision suggests there is a gap in patient perspectives on these lenses and what eye care practitioners (ECPs) assume patients expect. The survey, which included more than 450 ECPs and 1,500 consumers from the United States, United Kingdom, and Japan, revealed that just 52% of the daily disposable fits recorded in the 2017 prescribing report were found to use silicone hydrogel materials.

About 92% of ECPs agreed that 1-day silicone hydrogels lenses are the best choice to safeguard eye health relating to contact lens wear, and 87% reported that silicone hydrogels should be the first choice for daily disposables. However, ECPs identified three barriers to using 1-day silicone hydrogel lenses:

1. Cost
2. Allergy to silicone
3. Comfort

A better understanding of these barriers and further education of support staff are critical steps to increasing utilization of 1-day silicone hydrogel contact lenses.

There is a desire among patients to hear about the healthiest option. It appears the ECP has greater freedom than they realize to recommend their preferred contact lens. Better communication can improve the ECP-patient relationship, enabling you to fit more of the lenses that you would prefer to!

SOURCE

CooperVision. 1-day silicone hydrogel contact lens report. Available at: <https://coopervision.com/practitioner/clinical-resources/one-day-silicone-hydrogel>. Accessed January 9, 2019.



A Strategic Approach to Tax Deductions

At the 2018 ALLDocs annual meeting, Steven Wonder, CPA, discussed various strategies for making current tax laws work to your benefit. Below is a summary of his top 10 ways to maximize your tax deductions.¹

10 Achievement Awards

Companies can give their employees 3 separate material awards annually, and each can be worth up to \$1,600. Offer these awards as items. Just make sure they are not cash or gift cards.

9 Annual Corporate Meetings

As a business owner, you can combine annual meetings with a vacation and make the entire trip deductible.

8 Corporate Gyms

Although you cannot directly deduct costs of gym memberships, you can deduct costs of gym equipment.

7 Business Gifts

Company gifts of up to \$25 per year can be given to individuals. Use these gifts as year-end or holiday bonuses. Also, company gifts to other companies are unlimited (within reason).

6 Health Reimbursement Arrangements (HRAs)

Businesses can deduct otherwise non-deductible, healthcare-related costs. HRAs are IRS-authorized, tax-advantaged, and employer-funded. These reimbursements are not income to the recipients. The maximum for 2018 was \$5,050 for individuals and \$10,250 for families.

5 Seminars

Companies can pay for the cost of educational seminars, even if the subject matter of these seminars has nothing to do with your current business.

4 Medical Insurance Premiums

Health and accident insurance premiums paid on behalf of a >2% S corporation shareholder-employee are deductible by the S corporation and reportable as wages on the shareholder-employee's Form W-2 (subject to income tax withholding). However, these additional wages are not subject to Social Security, Medicare (FICA), or Unemployment (FUTA). The premiums are deductible without any limitations.

3 Rent Your Home

A business can rent its primary residence for "events," such as holidays and corporate functions. To qualify, the residence must be rented fewer than 14 days per year. Each 24-hour increment equates to 1 rental day. The income from renting the residence is tax free and you can charge rates similar to that of other neighborhood facilities.

2 Tuition Reimbursement Plans

Companies can pay up to \$5,250 annually for qualified educational programs. These are tax-deductible. Tax-exempt tuition also benefits employees.

1 Hire Your Kids

If done correctly, your business can hire your children and receive a \$12,000 per-year, per-child deduction. Additionally, at \$12,000, the child is not required to report the income. The result is the business receives a deduction without any income changes for the family.

SOURCE

1. Wonder S. Profits in your pocket. A strategic way of looking at your taxes. Presented at: ALLDocs 2018 annual meeting, November 11-16, Cancún, Mexico. Available at: <https://www.alldocsod.com/wp-content/uploads/2018/11/Profits-in-your-Pockets-Taxes.pdf>.

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 Wonder CPA Firm, PC



Glaucoma: Are Pillows a Danger?



Researchers in the Netherlands recently assessed if significant increases in intraocular pressure (IOP) occurred during simulated sleep conditions in which the subject's head was turned comfortably into a pillow and analyzed the effect of protective glasses on any such IOP rise. In total, the study involved 11 patients with primary open-angle glaucoma and 11 healthy volunteers.

In the simulated sleep position, the average IOP increased by an estimated 19.6 mm Hg in patients with primary open-angle glaucoma and 28.0 mm Hg for healthy (control) patients. When subjects wore protective glasses, the average estimated IOP decreased again by 16.3 mm Hg in the patient group and 25.1 mm Hg in the control group. Based on the results, the study team concluded that protective shielding of the eyes during sleep may be a treatment option in glaucoma.

SOURCE

van Meurs IA, Thepass G, Stuij AA, Bollemeijer JG, Lemij HG. Is a pillow a risk factor for glaucoma? *Acta Ophthalmol.* 2018;96:795-799. Available at: <https://www.ncbi.nlm.nih.gov/pubmed/30298695>.





CONTACTS



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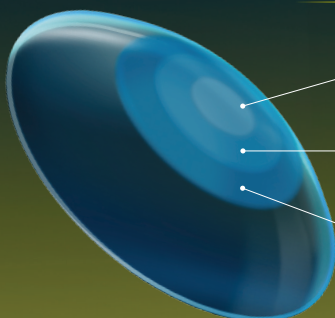
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*First fit success for Bausch + Lomb ULTRA® for Presbyopia achieved when the ECP followed the fitting guide for the 3-Zone Progressive™ Design of PureVision² for Presbyopia lens. Thirty-nine ECPs (from 10 countries) refitted 441 existing soft contact lens wearing presbyopes into PureVision² for Presbyopia lenses. Patients returned for follow-up visits after 1-2 weeks. ECP assessment of lens performance including ease of fit, and patient satisfaction with lenses in real-world conditions, were measured using a 6-point agreement survey.

REFERENCE 1: Results of an online survey with patients that wore Bausch + Lomb ULTRA® for Presbyopia lenses for approximately 5 days (n=395). Survey questions were top 3-box scores (% Strongly Agree, Agree, Slightly Agree) on a 6-point agreement scale.

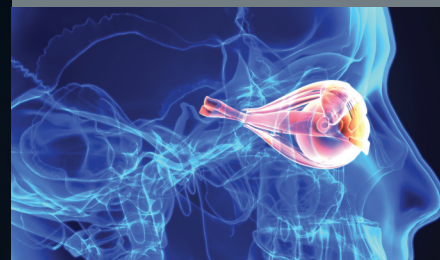
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SCEYENCE

A Closer Look at the Diabetes-IOP Link



Previous research has shown that diabetes appears to be associated with thicker central corneal thickness (CCT), and thicker CCT has been linked to higher intraocular pressure (IOP). To clarify the diabetes-IOP association, the Singapore Epidemiology of Eye Diseases (SEED) study was conducted in a cohort of more than 8,600 patients, nearly 30% of which had diabetes.

According to the results, patients with the following factors were identified as having higher IOP levels:

1. Diabetes
2. Long-term hyperglycemia
3. Higher serum glucose
4. Elevated HbA1c levels

The research team concluded that the high IOP levels observed in people with diabetes was mainly due to the direct association of these entities. They added that this finding may have pathophysiologic significance regarding the risk of glaucoma among people with diabetes.

SOURCE

Luo XY, Tan NYQ, Chee ML, et al. Direct and indirect associations between diabetes and intraocular pressure: the Singapore Epidemiology of Eye Diseases study. Invest Ophthalmol Vis Sci. 2018 Apr 1;59(5):2205-2211. Available at: <https://iovs.arvojournals.org/article.aspx?articleid=2680223>.

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