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## specialty

# Create a Vision Therapy Niche

## Prepare for VT patients while growing your practice's bottom line.

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Optometrists can't be all things to all patients. But we would be wise to embrace specialty areas of care within optometry such as vision therapy (VT) by choosing to either refer to other optometrists or become one of those optometrists providing VT.

Millions of children and adults suffer from binocular vision disorders. It is estimated that one out of four kids have vision problems.<sup>1,2</sup> Also, about 60% of children with learning difficulties have visual problems, according to the American Optometric Association.

With the hype surrounding 3D technology, the importance of binocular vision has been brought to the forefront, and 10% to 20% of the US population has binocular or accommodative vision problems.<sup>3</sup>

In this era of managed care, developing a VT allows you to differentiate yourself. For instance, about 20% of all fees generated in my practice are directly attributed to VT related services. Consider a practice that grosses \$2 million. That's \$400,000 of additional gross income.

The number of potential VT patients is overwhelming. However, if VT is a new area for, you can use the acronym "THERAPY" to overcome the fear that may block you from creating a VT practice.

## T TRAINING

Most optometry schools provide the basis for evaluation and treatment of basic, simple VT cases, though you'll quickly find that the patients you'll be seeing have more complex visual issues and need much more than the simple convergence insufficiency VT protocol. It's great if you have completed a residency in VT; however, most VT optometrists have not.

To have a successful VT practice, additional continuing education and experience are essential. Some of the best resources that provide programs that boost your learning and VT experience: College of Optometrists in Vision Therapy (COVD.org), Optometric Extension Program Curriculum (OEPF.org) and Dr. Robert Sanet's training course (robertsanet.com). Most optometrists who have a successful VT practice have become certified (F.C.O.V.D.) in vision therapy and development through College of Optometrists in Vision Development (COVD).



**Successful improvement in binocular skills can often be achieved with simple equipment such as the Brock String.**

## HOW TO STRUCTURE THE PROGRAM

Managing a VT practice requires different evaluations, forms, schedules, fees and staffing:

- ▶ **Evaluation.** VT evaluation uses the standardized optometric tests that probe into the binocular, accommodative, eye movement status and ocular/neurologic health. Additional testing in binocularity, visual information processing and motor skills are often recommended if warranted per history or initial testing.
- ▶ **Forms.** Specific checklists and forms are utilized for VT patients. Developmental history, school performance, and motor skills are often explored. For sample forms, check [www.hbvvision.net/forms](http://www.hbvvision.net/forms).
- ▶ **Scheduling exams.** These exams (approximately 45 to 60 minutes) often take longer than typical comprehensive vision evaluations because of the more extensive history and possible behavior or age-related challenges. Additional time must be scheduled for binocular, developmental and consultation services. These additional evaluations may take 30 to 60 minutes each.
- ▶ **Codes.** Different fees and procedure codes are utilized in a VT practice. In addition to the 92000 and 99000 codes typically used in an optometric practice, other codes might be utilized (97000, 96116). Some of the VT procedures may not be covered under ICD9 codes, depending on your state and insurance carriers. Make sure that your patients understand your fee structure. Have your office staff (possibly a vision therapist) discuss your fee structures and provide the patient with a written document that includes the fee estimates.
- ▶ **Scheduling sessions.** Patients are often seen in the office one or two times a week in addition to receiving home vision therapy activities that should be practiced daily for 15 to 20 minutes a day. In-office sessions are typically 30 to 45 minutes, and patients are seen individually or in a small group. The length of VT programs greatly depends on the diagnosis, compliance of home therapy, depth of treatment and individual vs. group sessions. In my office, patients with basic binocular dysfunctions are often seen for 12 to 16 sessions. Patients with learning and processing problems may be in VT for 24 to 36 sessions.
- ▶ **Staffing.** In most optometric practices, the optometrist provides the evaluation, prescription and management of the VT program. The actual VT is delegated to well-trained vision therapists, often certified as vision therapists (C.O.V.T.) by COVD. My practice has five certified vision therapists.

## E EQUIPMENT

VT can be successful with minimal equipment, which may cost less than \$3,000. With the new digital technology and high-tech equipment available, VT equipment could run from \$50,000 to \$100,000. (See "Equipment List" on page 40.)

The general rule is to start with minimal equipment and build as your practice grows. I started my practice with a Brock String, +/- flipper, aperture rule, vectograms, and red/green materials. This was my way of getting great results with minimal cost. You may also consider spending extra dollars on one or two of the more expensive pieces of VT equipment sooner rather than later. The reason: along with your cutting-edge expertise, patients are often impressed by these high-tech pieces of equipment.

## R ROOM REQUIREMENTS

Room space depends on the number of VT patients seen at one time. Most doctors start with a small room dedicated to VT, approximately 100 sq. ft. As your practice grows, the VT space may become 2,000 to 3,000 sq. ft. If you are treating up to four patients at a time, with four vision therapists, you can understand how the space requirements increase.

<b>Equipment List</b>
<p>Basic VT equipment</p> <ul style="list-style-type: none"> <li>• Brock String</li> <li>• Set of flippers: +1.00 to +2.50</li> <li>• Vectograms with polaroids</li> <li>• Patches</li> <li>• Toys and fixation targets</li> <li>• Loose prism set</li> <li>• Cheiroscope</li> <li>• Peg rotator</li> <li>• Marsden ball</li> <li>• Charts: Hart chart, Kirschner arrow chart</li> <li>• Parquetry blocks</li> </ul> <p>Additional high-tech equipment:</p> <ul style="list-style-type: none"> <li>• Home Therapy System (HTS)</li> <li>• Saccadic Fixator</li> <li>• Sanet Integrator</li> </ul>

I started my VT practice 35 years ago with only my exam room available. Today, I have 2,000 square feet allocated strictly for vision therapy.

## A ASSOCIATE NETWORKING

The key to building a VT practice is communication and networking. It is essential to seek out referral sources such as educators, therapists and physicians. Here are some ways to do so:

- ▶ Write reports to healthcare providers and educators.
- ▶ Offer your services to schools or sports groups. Let your patients help you identify the appropriate contacts for these in-services.
- ▶ Set up monthly free workshops at your office providing good, solid education on topics of your passion.
- ▶ Build your e-mail list of referral sources, patients and other professionals so that you can easily e-mail newsletters, announcements of classes and events.

- ▶ Use social media to help build your network.

The possibilities are tremendous. You or a very good staff member just need to stay focused on these projects.

## P PLAN FOR GROWTH

Marketing starts internally with your own practice, and then moves externally. Maintain a current, informative website so that your patients learn about you, your practice and the benefits of VT. Also, consider social media to expand your marketing exposure.

## Y YOU AND YOUR STAFF

Invest in your staff. Take time to train and educate your staff. This can happen daily or weekly during staff meetings. Encourage and support your staff to take pertinent continuing education.

If you are interested in developing a reputable VT practice, then you need to develop your expertise in this area. Don't think that you can just hire a vision therapist to make your practice successful.

## A final note

Another reason to take on the challenge of a VT practice? Read what one parent wrote to me: "My daughter now reads without struggling. Her confidence has grown tremendously. Vision therapy has changed our lives. Thank you!"

This specialty area helps your bottom line while allowing you to make a difference in your patients' lives. **OM**

1. *Prevent Blindness America. Common Children's Eye Problems.*  
[http://www.preventblindness.org/children/ch\\_eye\\_problems.html](http://www.preventblindness.org/children/ch_eye_problems.html) (Accessed March, 21 2008).

2. *Center for Health and Health Care in Schools. Childhood Vision: What the Research Tells Us. The George Washington University, June 2004.*  
[http://www.healthinschools.org/News%20Room/Fact%20Sheets/~media/Files/vision.ashx](http://www.healthinschools.org/News%20Room/Fact%20Sheets/~/media/Files/vision.ashx) (Accessed February 26, 2008).

3. *American Optometric Association. Care of the Patient with Accommodative and Vergence Dysfunction.* <http://aoa.org/documents/cpg-18.pdf> (Accessed February 21, 2013).



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