



IAO BOARD OF DIRECTORS' POLICY STATEMENTS

STATEMENTS MADE ON BEHALF OF THE INDIANA ACADEMY OF OPHTHALMOLOGY, INC.

POLICY: It is the policy of the Indiana Academy of Ophthalmology, Inc. ("IAO"), subject to ongoing review and periodic modification by the Board of Directors, that each individual IAO Director, Officer, Councillor, Board Member, Committee Chairperson or Committee Member owes to the IAO and its members an obligation to discharge his or her duties in good faith and in a manner that the individual reasonably believes is in the best interests of the IAO and its members.

No IAO Director, Officer, Councillor, Board Member, Committee Chairperson or Committee Member shall have the authority to, or shall, issue any statement (written, oral, or otherwise) to any person or entity with respect to any issue in connection with which the person issuing the statement identifies his or her affiliation with the IAO, or purport to speak or act on its behalf of, in the name of, or with the endorsement of the IAO, without prior authorization from the IAO Board of Directors and the written consent of the IAO office.

No such person shall have the authority to, or shall, issue any written statement on IAO letterhead to any person or entity without prior authorization from the IAO Board of Directors and the written consent of the IAO office. The listing of an IAO position or affiliation on the CV or resume of an individual is, of course, generally appropriate and does not implicate the above policy.

This policy is intended to maintain the standard of excellence demonstrated by all individuals associated with the IAO and to protect both the IAO and those persons from allegations of wrongdoing or unauthorized activity in the discharge of their duties.

*Adopted: January 28, 2005
IAO Board of Directors*

POLICY FOR CONSUMER INQUIRIES

When consumers call to inquiry regarding IAO members, IAO staff should take the following steps in handling the call.

1. Explain that the IAO does not have appropriate means for disciplining members that we are a membership organization not a credentialing organization. Further explain that the Federal Trade Commission actually prohibits us from such action.
2. Suggest that they speak directly with the treating physician.
3. Offer them the names of 2 or 3 other ophthalmologists in the area, IAO members if possible.
4. Tell the consumer that since we are not the appropriate organization to handle a situation such as this, suggest they contact one of the three following organizations:
 - A. Their county medical society or the Indiana State Medical Society.
 - B. The Health Professions Bureau.
 - C. The Indiana Attorney General's Division of Consumer Affairs.

The IAO does believe that most concerns can be addressed by discussion with the treating physician.

*Accepted: June 11, 1994
Indiana Academy of Ophthalmology Board of Directors*

POLICY CONCERNING ANSWERING CONSUMER QUESTIONS

When consumers call to inquiry about medical procedures, IAO staff should take the following steps in handling the call.

1. Explain that the IAO does not have a physician on staff to answer medical questions.
2. Offer the consumer the names of 2 or 3 member ophthalmologists in their area.
3. Offer the consumer the number of the American Academy of Ophthalmology.

*Indiana Academy of Ophthalmology Board of Directors
Accepted: 10/21/94*

POLICY CONCERNING ANSWERING NON MEMBER QUESTIONS

When non members call to ask questions of IAO staff, the staff should take the following steps in handling the call.

1. Explain that the IAO is a membership organization and as such can not provide information services for nonmembers.
2. Offer the non member the names of 2 or 3 member ophthalmologists in their area.
3. Offer the non member the number of the American Academy of Ophthalmology.

Indiana Academy of Ophthalmology Board of Directors
Accepted: 10/21/94

GUIDELINES FOR THE AVOIDANCE OF INADVERTENT ANTICOMPETITIVE CONDUCT

Policy:

The Indiana Academy of Ophthalmology, Inc. (IAO), with the advice of legal counsel, has adopted guidelines to help prevent inadvertent anticompetitive conduct. These guidelines apply to all of the IAO's fellows, members, trustees, officers, committee members, representatives, and employees.

Background:

Antitrust laws prohibit certain types of behavior and agreements, even among professionals and professional societies. IAO members have dedicated years of study and effort to developing their skills and professional reputations, and the IAO does not want these tarnished by even the appearance of inappropriate behavior. Nor does the IAO want its members or the IAO exposed to criminal penalties (for individuals, up to \$350,000 and imprisonment up to three years for each offense, or up to \$10,000,000 for organizations) or treble-damage civil lawsuits. These guidelines are intended to help you be aware of the basic rules and protect against the real risk that you, your practice group, or the IAO could face needless litigation.

The exposure to antitrust litigation and expense – even if you and the IAO ultimately prevail – is real. For example:

- ✓ In 1999 the U.S. Justice Department sued the Federation of Certified Surgeons and Specialists, Inc. and obtained a court order preventing it from negotiating with any payers on behalf of its physician members, and from facilitating any agreement or understanding between competing physicians about any competitively sensitive information.
- ✓ In 1996 the Federal Trade Commission sued the Montana Associated Physicians, Inc. and obtained an order preventing it from negotiating or refusing to deal with third-party payers; determining the terms upon which physicians deal with such payers; or raising, maintaining, or adjusting the fees charged for any physician's services.
- ✓ AMA was reminded of the risks in 1990 when chiropractic prevailed in protracted and very expensive litigation. The court ruled that AMA had led an unlawful boycott of chiropractors and that AMA's conduct could not be justified by patient-care concerns. The court ordered AMA to take specific steps so that physicians could freely decide whether to have professional relationships with chiropractors.

Guidelines:

IAO members compete with one another in providing quality care to the public.¹ As competitors, there are certain types of agreements that IAO members cannot lawfully make.

¹ A contract, combination, or conspiracy can exist only if there are two or more separate economic entities acting together. Two ophthalmologists with competing, independent practices would each be considered a separate economic entity for this purpose. Those same two ophthalmologists, practicing together in one partnership or professional corporation, would be considered just one economic entity for this purpose. Thus, the two independent ophthalmologists could not agree with each other to fix their fees at specified levels for certain procedures, but the

- Members must not make any agreement to fix, raise, or stabilize prices or fees (or any element of prices or fees) or restrict services that a member can offer.
 - Example: Dr. Ford and Dr. Callahan, who practice in the same community, run into one another at a social hour sponsored by a pharmaceutical company. After they discuss some recent developments in refractive surgery, their conversation turns to the rates that they charge LASIK patients. Dr. Ford says that he would like to raise his rates for such patients, but he needs to know what Dr. Callahan would do. Dr. Callahan says that it is “a great idea whose time has come.” Two weeks later, Dr. Ford raises his rates. The following week, Dr. Callahan likewise raises his rates.
 - Problem: From these facts a jury might conclude that the two members made an agreement to fix prices, which would be a clear violation of the antitrust laws. Although a price-fixing agreement is illegal whether or not it is effective, here the fact that one doctor specifically “needed” to know how the other would respond would probably make it easier to demonstrate that an illegal agreement had been made.
 - Example: Dr. Freeport has decided to offer free screening for seniors in nursing homes. At the local Society meeting, several members sponsor a resolution condemning the practice of free screenings under penalty of expulsion or disciplinary action.
 - Problem: This resolution, if adopted, would constitute an illegal agreement to restrict service.
- Members must not make any agreement to allocate or divide geographic or service markets, customers, or patients.
 - Example: Dr. Harris and Dr. Wesley see one another at a lecture program at the medical school. Dr. Harris mentions that over the last several months, two patients have stopped seeing him and have gone to Dr. Wesley instead. Dr. Wesley says that he understands Dr. Harris’s point, and that he will not accept as new patients anyone who was seeing Dr. Harris, and that he knows Dr. Harris will extend the same courtesy, should it ever be needed.
 - Problem: In addition to the ethical issues that this raises, it also appears to be an agreement to refrain from competing for patients – and thus a violation of the antitrust laws.
- Members must not make any agreement to collectively refuse (or encourage others to refuse) to do business with a provider, a third-party payer, managed care organization, a supplier, a purchaser, a patient, or any groups of such persons or companies.
 - Example: An insurance company announces that it will no longer pay for a certain procedure. The issue comes up at a meeting of the local Society, and during the cocktail hour several leading members announce that they will not accept patients whose coverage is provided by that insurance company. Others in the group say that this is a great idea, and they support it.
 - Problem: These members appear to have agreed to refuse to deal with the insurance company (and its patients). Although each member had the right to

two ophthalmologists in partnership could agree on the prices that their partnership will charge, but they could not make any agreements with a third, independent ophthalmologist.

make a unilateral decision not to accept such patients, the collective agreement is a per se violation of the antitrust laws.

- Members must not make any agreement to discourage entry into or competition in any segment of the health care market.
 - Example: Dr. Greene and Dr. Waugh are busy LASIK surgeons in competing practices. In response to what they perceive to be improper demands from referring optometrists, Drs. Greene and Waugh agree that in the future they will not co-manage with any optometrists.
 - Problem: Drs. Greene and Waugh have made an illegal agreement to refuse to deal with the optometrists. (Note that the problem here is the agreement – any individual member and any practice group can make unilateral decisions as for the conduct of their own practice, so long as they do not make an agreement with members outside their own practice group.)
- Members must not make any agreement to restrict, limit, or prohibit truthful advertising.

An “agreement” does not have to be formal or written in order to be unlawful; it does not even have to be explicit. In fact, what often matters is not whether there actually is an agreement, but whether others might perceive that there is an agreement based on what they see (or think they see). For this reason, IAO members should avoid ambiguous situations. For example:

- Members should use caution in discussing whether the practices of a particular member or other person (that is, an actual or potential competitor) are “unethical” or “anticompetitive” – this might be perceived as an attempt to unlawfully exclude someone from providing health care services.
- Members should also be cautious in any group discussions about the safety, quality or efficacy of the products or services of other health care providers. This does not mean that members should avoid reasonable discussion and assessment of the safety or efficacy of technology, drugs, and devices – but the discussion should not sound like members will collectively refuse to refer business.
- Members should not discuss the benefits of jointly withholding business from some firm or group of people, or discouraging others from doing business with one or more people. This, too, can very easily be misconstrued as a group boycott.

All IAO meetings should be conducted in a manner consistent with these guidelines. Moreover, care should be taken to be able to demonstrate that members followed these guidelines in their meetings. For example, all meetings should follow written outlines or an agenda, and minutes should be prepared and preserved. Except for matters protected by the attorney-client privilege, all discussions conducted and all decisions reached at those meetings should be reflected in the minutes of those meetings. IAO representatives to other organizations should take reasonable steps to ensure that such organizations follow the same practice.

Statements made by individuals apparently acting on behalf of the IAO are particularly dangerous. Such statements (e.g., issuing any statement on IAO letterhead or speaking at a conference without stating that the views expressed are solely your own) may be construed as demonstrating an unlawful agreement when in fact no agreement exists at all. IAO members should particularly refrain from

statements suggesting they have agreed not to deal with a particular group of suppliers or competitors.

The antitrust laws do not prohibit the IAO or its members from asking the legislature or other governmental bodies to establish rules affecting the profession, even if those rules when adopted may have some effects on competition – because petitioning the government is one of our fundamental rights and duties as citizens. But just because citizens can ask the government for something does not mean that they can “jump the gun” by agreeing to adopt the requested measure among themselves before the government acts. IAO members should be careful to ensure that their discussions do not look like a prohibited form of private agreement. IAO members should not use the IAO’s name in connection with collective political action unless it has been approved by the IAO’s Board or an appropriate Board committee.

IAO members are strongly encouraged to consult with competent antitrust counsel before undertaking any collective activity that might have competitive implications. IAO members, especially those in leadership positions, may also benefit from attending antitrust compliance programs.

*Re-Adopted: January 28, 2005
IAO Board of Directors*

Policy for Indiana Academy of Ophthalmology Leaders

Policy:

It is the policy of the Indiana Academy of Ophthalmology (IAO), subject to ongoing review and periodic modification by the Board of Directors, that each IAO Officer, Director, Committee Chair and committee member owes to the IAO and its members a duty of loyalty and fairness, and an obligation to discharge the duties of an IAO Leader in good faith and in a manner that is in the best interests of the IAO and its members.

Background:

The Indiana Academy of Ophthalmology and its membership has benefited enormously from the countless hours of volunteer work IAO Leaders have devoted in service to IAO programs and activities. The quality and value of these programs are a direct reflection upon these leaders and the staff.

In nominating members to serve on the Board of Directors, and in selecting members to serve on its committees and task forces, the IAO seeks individuals with the experience, skills, and knowledge needed to do the job. Equally important, the IAO selects those individuals with a reputation for excellence, both in the quality of their efforts and in their ethical standards.

In recent years, physicians' roles have expanded beyond traditional parameters of clinical care. In many instances, physicians are assuming leadership, consulting or significant equity positions in business, which potentially impact or are impacted by IAO activities. If the IAO were to select only leaders not involved in such business ventures, it would seriously limit its ability to use the most capable and experienced individuals, which would not be in the best interests of IAO members.

Evaluation:

This Policy Statement is intended to maintain the standard of excellence demonstrated by all IAO Leaders, and to protect these Leaders from allegations of wrongdoing in the discharge of their duties.

Recommendation:

All references herein to an IAO Leader means the IAO Leader, a relative of the Leader, an organization in which the Leader or a relative has a material financial interest, and an organization of which the Leader or a relative is a director, trustee, officer, or employee. The term commercial excludes pursuits that are predominantly clinical, scientific, or academic.

Each IAO Leader, as a condition of eligibility for initial election or appointment to a position of IAO leadership and for continued service in that position, shall:

1. Disclose to the IAO the existence and nature of any personal or family interest in any activity that is, or reasonably could be expected to be, subject to this Policy Statement;
2. Disclose to the IAO board or committee on which the IAO Leader serves the existence and nature of any personal commercial interest of the Leader, with respect to any actual or proposed contract or arrangement between the IAO and the IAO Leader, or any proposed endorsement by the IAO of any product or service of the IAO Leader, in advance of any discussion of or decision

regarding the proposed contract, arrangement or endorsement by that body, and abstain from the discussion and the decision;

3. Refrain from misusing the Leader's position as an IAO Leader to solicit, directly or indirectly, commercial opportunities for the Leader, such as
 - a) by accepting the invitation of any professional or other organization to speak, at an educational or scientific meeting of the IAO or other organization, in the Leader's capacity as an IAO Leader and, in connection with that activity, referring to or soliciting, or causing or permitting others to refer to or solicit on the Leader's behalf, commercial opportunities for the IAO Leader,
 - b) by soliciting or carrying on commercial opportunities for the IAO Leader and, in connection with that activity, referring to or causing or permitting others to refer to the leader's position as an IAO Leader. In order to avoid the appearance of impropriety, there must be a clear separation by time and locale between the activities undertaken as a leader of the IAO and those activities undertaken as a commercial interest,
4. Honor and keep confidential all privileged or confidential information of or involving the IAO that is obtained by the IAO Leader by reason of or in connection with that person's position of IAO leadership, and shall not use any of such information in connection with the Leader's commercial activities or disclose any of such information to any person or organization for any purpose whatsoever;
5. In the case of an IAO Officer or Board member only, avoid and refrain from any personal appearance by, or causing or permitting others to refer to, the IAO Officer or Board member as an IAO Leader in connection with an exhibit at any IAO meeting that promotes the commercial services or products of the IAO Officer or Board member.

*Adopted: January 28, 2005
IAO Board of Directors*

Diversity Policy

The Board of Directors of the Indiana Academy of Ophthalmology recognizes that this organization is best served by representation from the broadest possible diversity of member background, experience and thoughts. As a policy, the Board of Directors is committed to diverse representation on the Board of Directors, its committees, and staff without regard to race, religion, national origin, sexual orientation, age, gender, or physical disability.

*Adopted: January 28, 2005
IAO Board of Directors*

Relationships with Other Organizations

A primary goal of the Indiana Academy of Ophthalmology (IAO) is to provide continuing medical education to enhance the ophthalmologist's ability to furnish the highest possible quality of eye care for patients. Therefore, relationships with other organizations must not jeopardize the IAO's standing as a respected organization.

Policy

When appropriate and desirable, the IAO may solicit or accept financial or other support from both for-profit and not-for-profit organizations in order to develop and/or improve activities and programs that are consistent with the IAO's mission statement. All arrangements for financial or other support must fall within the guidelines of this policy statement or be reviewed by the Board of Directors or the Executive Committee acting on behalf of the Board of Directors. Support for all continuing medical education programs and activities must adhere to the Standards for Commercial Support of Continuing Medical Education (CME) of the Accreditation Council for Continuing Medical Education (ACCME). In addition, with regard to gifts to physicians and the conflicts inherent in such gifts, the Board of Directors has adopted the American Medical Association's (AMA) guidelines as outlined in the AMA publication entitled "[Gifts to Physicians from Industry](#)."

Background

Financial and other support from corporations, foundations and other organizations can contribute significantly to both the quality and scope of IAO programs, activities and services. The IAO shares many common goals with other organizations, including corporations in ophthalmic industry, and it is appropriate for the IAO to cultivate and maintain appropriate and ethical relationships with these organizations. Such relationships must not pose conflicts of interest for the IAO, its officers, staff, members or the sponsoring organizations, and they must be consistent with the goals and objectives of the IAO's strategic plan.

Definitions

The IAO may enter into different types of relationships or arrangements with other organizations as defined below.

Sponsorship: A financial donation to the IAO to support an IAO product or service with appropriate recognition for the donor.

Joint Sponsorship: A joint effort in which both (or all) organizations or institutions are integrally involved in planning and developing an IAO program.

Joint Sponsorship for CME: The ACCME accredits the IAO through the Indiana State Medical Association to provide CME to physicians. The ACCME publication Essentials and Standards includes definitions and requirements specific to the joint sponsorship of CME.

Cooperative Relationship: A relationship in which the degree of involvement of one organization or institution in the planning, developing or implementing a program or service is

less than that of the primary sponsoring organization or institution. The terms "in cooperation with" or "cooperating organizations" are used to describe such relationships.

Endorsement: Approval by the IAO of, or the loan of the IAO name to, a program or service developed by another organization. Endorsements must be approved by the Board of Directors.

Alliance or Collaboration: A joint effort of two entities that benefit from sharing profit, cost-savings, service, royalties, license or name recognition.

Guidelines

1. In general, the IAO will proactively choose its priorities for entering into relationships and arrangements with other organizations; however, the IAO will also consider opportunities presented by other organizations.
2. All proposed arrangements and relationships must fit the guidelines outlined here or be reviewed by the IAO Board of Directors or the Executive Committee acting on behalf of the Board of Directors, in order to ensure that acceptance of funds or use of IAO funds would not have a negative influence on IAO programs or policy or be inconsistent with the IAO's mission and goals.
3. Proposed arrangements and relationships must not compromise the IAO's good name, its reputation, the privacy of its members, the existence or identity of the IAO, its tax status, or its trademarks.
4. Participation in a specific arrangement or relationship does not in any way imply IAO approval of an organization's general policies, nor does it imply that the IAO will exert any influence to advance the organization's interests outside the substance of the arrangement itself. The IAO's name and logo may not be used in a manner that would express or imply IAO endorsement of the organization or its policies.
5. The IAO accepts funds or royalties only if acceptance does not pose a conflict of interest and in no way impacts the objectivity of the IAO, its members, officers or employees.
6. The IAO does not endorse or certify health or medical products or medical services produced by other companies and marketed to consumers.
7. The IAO does not endorse programs developed by other organizations or institutions, except as determined by the Board of Directors.
8. The IAO does not actively seek endorsements of IAO programs or services from other organizations or institutions except as determined by the Board of Directors.
9. In accordance with ACCME standards, the IAO will conduct all CME programs independently and without influence or control from other supporting organizations. Supporting organizations shall not influence or control the program planning, program content or execution of the activity; the program must be free of commercial bias for or against any product; and any product discussion must be objective, balanced and scientifically rigorous. Corporate sponsors may not engage in promotional activities in the CME program location or in the CME materials, and no

promotional materials may be disseminated during the CME activities.

10. In accordance with the AMA's guidelines on "[Gifts to Physicians from Industry](#)" and the ACCME Standards for Commercial Support (an element of the IAO's accreditation to provide CME), funding from industry to underwrite the costs of CME conferences or professional meetings should be made to the IAO and not to individual physicians. Subsidies from industry should not be accepted to pay for the costs of travel, lodging or other personal expenses of the physicians who are attending CME conferences or meetings. Subsidies for hospitality should not be accepted outside of modest meals or social events that are held as part of a continuing medical education conference or meeting. Industry support for the costs of travel and lodging for attendees who might not otherwise be able to participate in an IAO event (e.g., ophthalmologists from countries or regions with developing economies) may in certain circumstances be considered appropriate; such situations will be addressed on a case-by-case basis.
11. Organizations that provide financial support to the IAO may be recognized. Such corporate or foundation recognition regularly occurs in IAO publications and other appropriate forums. Recognition does not include any reference to the organizational products. The institutional acknowledgment may state the name, mission and areas of clinical involvement of the company or institution, and it may include corporate logos and slogans if they are not product promotional in nature.
12. The IAO retains editorial control over any information produced as part of relationships or arrangements with other organizations. All intellectual property resulting from sponsorship by another organization will be the property of the IAO unless the Board has approved an agreement to the contrary. In every case, all materials in print, broadcast or electronic media prepared by the supporting organization must be submitted to the IAO for written approval prior to release.

Adopted: January 28, 2005
IAO Board of Directors

Privacy Policy

Our Commitment To Privacy

Your privacy is important to us. To better protect your privacy we provide this policy explaining our information collection and storage practices and the choices you can make about the way your information is collected and used. We have developed this policy to be consistent with the privacy principles in current practice of the organization. This policy may change over time. We will indicate at the "Effective Date" section when such changes take place.

The Information We Collect

We ask for information when you apply for membership, sign up for our programs, and on the website on any page on which you can order products, make requests, update company or personal information, and register to receive materials. The types of personal and company information that may be collected and the types of information covered by this policy include:

- Name
- Practice Name
- Title
- Email
- Practice and/or Home Address
- Practice and/or Home Phone Number
- Practice Manager Name
- Practice Manager Email
- Fax Number
- Mobile Number
- Date of Birth
- Credit Card Information

The Way We Use Personal Information

In order to provide you with better service, we may disclose or share information with selected business partners or other authorized third parties. It is always our intent to only release practice information. However, in some cases a personal or home address is the only information we have and it has not been indicated by you as such. These third parties are prohibited from selling, renting, or sharing any data that they receive. These partners are prohibited from using this information in any manner outside of the scope of the service that they have partnered with us to provide. All data shared in this manner is only used in accordance with our privacy policy.

When submitting a registration or dues payment, your information will be stored on our system in order to complete the requested transaction and must be shared with an outside party (our credit card processing vendor) in order to complete your transaction. We do not share this credit card information with any outside parties except for such purposes. We also record information about your transaction in our database; however, credit card numbers are not maintained in our database.

The Way We Use Member Information

The Academy maintains an Online Member Directory which lists information about our members, including name, practice name, address, satellite office locations, phone numbers, and a practice focus description that is self-reported.

Security

The Academy has security measures in place (including shredding of registration materials with credit card information or other personal information) in place to protect the loss, misuse, and alteration of the information under our control.

Email Address

The Academy will protect your email address from inappropriate use. The Academy will communicate with you through email with your permission.

Website Privacy

The Academy website provides restricted and unrestricted information. Unrestricted information is available to any user browsing our site. Restricted information is reserved for members of the Academy and can only be accessed through an established username and password. We do deploy technology to protect the information you send us. When visiting our site, your IP address is recorded. We use this information to create aggregate statistical reports, to track errors on the site, and for security reasons.

Website Copyright

The Academy owns the copyright in all contents of its website unless otherwise indicated. We present all such copyrighted material for personal use only as long as the copyright notice and permission notice is included in your reproduction. We expressly prohibit reprints or electronic reproduction of any document in part or in its entirety, unless you obtain prior written consent from the Academy or the owner of the material. Address all applications and inquiries to the contact cited on a particular page.

Disclaimer

The Academy provides on-line information and services on the Internet as a benefit to its members and the public and to further its educational mission. The information published on the Academy website is not intended to replace consultation with an ophthalmologist. The Academy cannot answer specific medical questions or refer you to a particular ophthalmologist.

Unless specifically stated otherwise, the opinions expressed and statements made by various authors on this website reflect the authors' observations and do not imply endorsement by the Academy.

The Academy does not exert editorial control over and has not participated in the development of other Internet websites. The Academy does not support, endorse, or hold any responsibility for hyperlink pointers, their website content, any of their expressed views, any services they offer or hyperlinks they mention. The Academy does not endorse any of the products or companies mentioned in the Academy website.

Our Commitment To Data Security

To prevent unauthorized access, maintain data accuracy, and ensure the appropriate use of information, we have put in place physical, electronic, and managerial procedures to safeguard and secure the information we collect physically and online. However, while we strive to protect your personal information, we cannot ensure the security of the information you transmit to us. Your use of our website is at your own risk.

How To Contact Us

Should you have any questions or concerns about these privacy policies, please send us an email at help@amplus.us or call 317-578-7768.

Changes to Our Privacy Statement

This privacy policy relates to our current privacy standards. We reserve the right to vary our privacy policy from time to time and will update the "Effective Date" section when such changes take place. Regardless of later changes, we will never use your information in a way materially different than stated in this current privacy notice without first offering you a meaningful opportunity to opt-out or otherwise prevent those new uses.

Effective Date: September 29, 2006

Adopted: September 29, 2006
IAO Board of Directors

Whistleblower Policy

Background

Understanding two provisions of the Sarbanes Oxley Act of 2002 points to reasons for adoption of whistleblower policies:

- The act calls for the imposition of criminal penalties, including fines and prison sentences of up to 10 years, for anyone who retaliates against someone who provides truthful information relating to the commission or possible commission of a federal offense.
 - Audit committees of publicly traded companies are required to establish procedures for receiving and dealing with complaints related to accounting and auditing and for anonymous complaints. Highly publicized corporate scandals have led many associations to voluntarily review their corporate governance structure and policies.
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Purpose

To provide a mechanism for employees, directors and volunteers to raise good faith concerns regarding suspected violations of law on the part of the Association, to cooperate in an inquiry or investigation by a court, agency, law enforcement, or other governmental body; or to identify potential violations of Association policy; and to protect employees who take such actions from retaliation.

The Indiana Academy of Ophthalmology is committed to maintaining a workplace where directors and employees are free to raise good faith concerns regarding the Association's business practices, specifically:

- (1) Reporting suspected violations of the law on the part of the Association
- (2) Providing truthful information in connection with an inquiry or investigation by a court, agency, law enforcement, or other governmental body
- (3) Identifying potential violations of Association policy, specifically the policies contained in the IAO Policies and Procedures Manual.

An employee, director or volunteer who wishes to report a suspected violation of law or Association policy should discuss the concern with the Association's executive director. If the executive director is the subject of the concern, the concern should be taken to the Board President. Concerns also may be submitted anonymously, in writing, to the board president.

The Association expressly prohibits any form of retaliation, including harassment, intimidation, adverse employment actions, or any other form of retaliation, against employees who raise suspected violations of law, cooperate in inquiries or investigations, or identify potential violations of Association policies. Anyone who engages in retaliation will be subject to discipline, up to and including termination of employment or dismissal from a volunteer position.

Any employee who believes that he or she has been subjected to any form of retaliation as a result of reporting a suspected violation of law or policy should immediately report the retaliation to either the Association's executive director or president of the board.

Reports of suspected violations of law or policy and reports of retaliation will be investigated promptly as assigned by the board president in a manner intended to protect confidentiality, consistent with a full and fair investigation. Appropriate corrective action will be recommended to the board of directors, who will resolve all reported complaints and allegations. The board of directors will notify the concerned individuals of their findings and prepare other reports as indicated by the circumstances.

Accounting and Auditing Matters

The executive committee of the board of directors shall address all reported concerns or complaints regarding corporate accounting practices, internal controls or auditing. The board president shall immediately notify the executive committee of any such complaint and work with the committee until the matter is resolved.

Acting in Good Faith

Anyone filing a complaint concerning a violation or suspected violation of the Code must be acting in good faith and have reasonable grounds for believing the information disclosed indicates a violation of the Code. Any allegations that prove not to be substantiated and which prove to have been made maliciously or knowingly to be false will be viewed as a serious disciplinary offense.

*Adopted: September 29, 2006
IAO Board of Directors*