NOW HIRING

The need for glaucoma subspecialists is soaring and creating a boom in job growth.

BY CRISTINA BOGGIANO LEWIS

A sharp increase in the need for glaucoma services, combined with a limited labor force, has employers considering whether they should add a glaucoma subspecialist. Currently, the subspecialty is undergoing a so-called golden age, when employers competing for top prospects are improving their offers. They are pitching greater incentives, expediting terms to partnership offerings, pledging flexible clinic schedules, and presenting additional vacation time. Inflated salaries are proliferating, but hits to reimbursement rates for glaucoma procedures are tempering enthusiasm in some quarters.

A LIMITED LABOR FORCE

Evidence of the rising need for glaucoma surgeons is growing. According to data from the American Glaucoma Society, ads for glaucoma subspecialists posted through the organization's portal increased a whopping 176% from 2014 to 2015. Conversely, membership rates for the American Glaucoma Society have only risen by an average of 57% over the past 5 years. At a time when jobs are plentiful, it seems that the subspecialty continues to add new physicians at a modest rate.

Multiple factors are contributing to the enhanced status of glaucoma subspecialists. Industry experts predict that the aging population will have a greater need for services, with an increase in the number of patients requiring glaucoma treatment and surgery. The Association of American Medical Colleges has predicted a physician shortage based on several points, including an aging physician workforce, millions of people who are becoming eligible for Medicare, and millions of newly insured patients funneled through the Affordable Care Act. The data suggest that the rate of physicians leaving the subspecialty through retirement will outpace the number of new physicians entering the labor force. A lower number of surgeons to manage a growing patient population is one cause of the shortfall in the labor force.

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AT A GLANCE

- A sharp rise in the need for glaucoma services, combined with a limited labor force, has created a job market favoring candidates over employers.
- Now is a good time for interested glaucoma subspecialists to seek new practice opportunities. Hits to reimbursement rates for glaucoma procedures and efforts at health care reform make the future less certain.

PERKS AND PITFALLS

A hiring frenzy can bring challenges for job seekers, not just employers. For example, candidates may receive multiple job offers but are better served by avoiding a bidding war; the world of ophthalmology is small, and it is important for job seekers not to appear dishonest about their intentions with a potential employer. Instead, I recommend communicating clearly and honestly about the offers under consideration.

It is worth bearing in mind that an employer successful in hiring a highly sought-after candidate will expect a fast return on investment (eg, rapidly added value to the practice).

In my experience, the vast majority of job candidates are more influenced by geographical location and workplace environment than compensation. Other important factors include opportunities for career growth and the practice's core values and culture. A savvy job seeker will embrace the chosen employer's attributes and understand their impact on his or her career and personal life.

Job hunters can enhance their success by joining a practice with a clear mission and vision that closely match their own. The chronic nature of glaucoma means a practice that prioritizes patients' care is well equipped to build and foster a new hire's career.

PROCEED WITH CAUTION

Not every employer is convinced that a glaucoma subspecialist is a proper investment. Dramatic reimbursement cuts for standard trabeculectomy have slashed profits, suppressing growth. Ophthalmology is responding by creating efficiencies clinically and surgically through a reliance on practice teams and an embrace of new technologies. Even so, threats of additional cuts are looming. The result is that some glaucomatologists may opt out of surgical care, while residents may reconsider completing a glaucoma fellowship. Cautious employers are delaying hiring or reigning in their compensation offers.

The glaucoma subspecialty continues to move forward with the development of new pharmaceutical, diagnostic, and surgical options for glaucoma management. Microinvasive glaucoma surgery has created a buzz and offers the potential to boost revenue. At the same time, however, many comprehensive ophthalmologists are assimilating these techniques into their practices, occasionally alleviating the need for a new glaucoma hire. Overall, I see employers relying more on their practice teams and using competent, well-trained comprehensive ophthalmologists and optometrists to diagnose, monitor, and treat glaucoma patients.

The present is an ideal time to explore new job opportunities. How the market will look in the future is uncertain. The Trump Administration and some members of Congress continue to push for health care reform. Whether they prevail and the impact of their efforts remain unknown. If the success of the field is determined by patients' demand, however, then the outlook remains positive for the glaucoma subspecialty. ■

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