

Senator Cirino Sponsor Testimony
Senate Bill 129
2/28/2024

Chairman Huffman, Vice Chairman Johnson, Ranking Member Antonio and members of the Senate Health Committee,

It is my pleasure to offer sponsor testimony to you today on Senate Bill 129 (SB 129), the “Ohio Vision Health Advancement Act”. SB 129 is measured, common-sense legislation that seeks to make incremental changes to the scope of practice of Ohio’s optometrists. Optometrists serve as the primary eye care doctors for many of our constituents and SB 129 constitutes the first scope of practice update for optometrists in 15 years. I strongly believe this legislation will benefit patients across Ohio and improve access to critical vision care while maintaining a “team approach” in the delivery of this care.

Please be assured that in agreeing to sponsor this needed legislation, the safety of patients is my top priority just as I know safety is the utmost priority of Ohio’s optometrists. SB 129 is a product of two years of intense internal discussions among the members of the Ohio Optometric Association (OOA) about procedures that they are trained and educated to do that will benefit their patients; patients who are also our constituents. SB 129 is about patients, access and the evolution of the ability to deliver quality vision care.

In the past, this General Assembly has shown great trust in Ohio’s optometrists for quality, cost-effective vision care, whether it be expanding the profession’s capabilities to better treat patients, the creation and funding of a vision care program to serve Ohio children in underserved areas or through the strong willingness to deliver care to Ohio’s Medicaid population. In expanding care and access for their patients through this legislation, Ohio’s optometrists are continuing

to support the public's trust by only asking to do procedures in which they would be properly trained and educated to perform.

When considering the many benefits to patients contained in SB 129, I feel it is important to also note what my legislation does not do. In SB 129, optometrists are NOT asking to perform LASIK eye surgery, Cataract eye surgery or make changes to current opioid prescribing standards. The legislation would permit optometrists to do certain in-office, non-invasive laser procedures and other basic procedures such as the removal of benign lesions like cysts, sties and skin tags. SB 129 would also update certain pharmaceutical regulations from 2008 to focus the ability of optometrists to use specific pharmaceuticals for treatment of the condition of the eye. It is my understanding that the Ohio Board of Pharmacy has no objection to this language that is contained in SB 129.

SB 129 will also help Ohio maintain a strong, well-trained eye care workforce. In Ohio, we are lucky to have one of the top-ranked colleges of Optometry in the entire nation through the College of Optometry at The Ohio State University. At Ohio State, Optometry students are being taught at a national level of practice. However, because our state's scope of practice has not evolved in 15 years to reflect this level of training, Ohio is at a disadvantage in attracting and potentially retaining the best and brightest young optometrists. Other states, such as our neighbors in Kentucky, Indiana and West Virginia along with Colorado, North Carolina and Oklahoma, allow optometrists to perform many of the enhanced procedures contained in SB 129. If our state is truly "open for business" and is committed to attracting and retaining the best and brightest in all businesses, I believe my legislation is important to this commitment in the area of quality vision care.

I have attached a fact sheet that details the training and education of Ohio's optometrists to give you a clear picture of the extensive qualifications of Ohio's optometrists. I believe these points support that Optometrists are more than qualified to perform the enhanced procedures contained in SB 129, while still placing patient safety at the forefront of their care.

Mr. Chairman, members of the committee, let me conclude my sponsor testimony today on SB 129 by reiterating that I believe this legislation will enhance the roll of optometrists in the team approach to care while continuing to provide quality, cost-effective vision care for patients in Ohio.

As you know, scope of practice issues are often difficult and sensitive issues to handle, despite the existing, positive relationships between various professions. I know that before the introduction of SB 129, representatives of optometry proactively reached out and met several times with representatives of ophthalmology to see if there were areas of the bill on which both sides could agree. Chairman Huffman and I conducted an interested parties meeting as well.

In closing, I believe SB 129 truly is a bill that will help all Ohioans through enhanced vision care while maintaining patient safety. I applaud the members of the Ohio Optometric Association for internally having conversations on what will truly benefit patients and bringing me a proposal that I know might not be as comprehensive as truly desired by the profession but is realistic and will improve the care of their patients while maintaining the "team concept" of delivering vision care. I am happy to answer any questions the members of the committee may have.

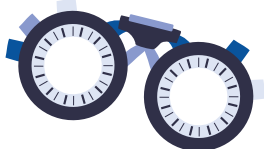
SB129 Primary Eye Care Modernization Bill

Optometry's first proposal to adjust its scope of practice in 15 years; a bill designed to better serve patients in an ever-changing healthcare landscape.

What **IS** included in the Primary Eye Care Modernization Bill:



- ✓ **Procedures to Remove Benign Lesions like Cysts, Styes & Skin Tags**
- ✓ **In-Office Noninvasive Laser Procedures**
 - Capsulotomy: removal of film that sometimes forms as a complication of cataract surgery
 - Selective laser trabeculoplasty: a glaucoma procedure which lowers pressure in the eye
 - Peripheral Iridotomy: a procedure to prevent closed angle glaucoma
- ✓ **Update Pharmaceutical Regulations to Allow for Treatment of Conditions of the Eye (no changes to opioid standards)**



What **IS NOT** included in the Primary Eye Care Modernization Bill:



- ✗ **LASIK eye surgery**
- ✗ **Cataract eye surgery**
- ✗ **Changes to opioid standards**

✗ **This bill is NOT the first of its kind.**

- Other states have been performing the procedures included in the bill for over 20 years.
- Border states Indiana, Kentucky, and West Virginia already have ability to perform many of these procedures.



✗ **This bill is NOT harmful to patients.**

- No documented cases of harm to patients from these procedures.
- No documented cases of harm to patients since Ohio's last scope expansion in 2008.

✗ **This bill does NOT take business away from ophthalmologists. 4%**

- Procedures included in the Bill make up only 4% of total procedures performed by ophthalmology. The Bill frees up ophthalmologists' time for more complicated surgical procedures and reduces wait times for patients.



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OPTOMETRIC EDUCATION AND CLINICAL PRACTICE

- + Doctors of Optometry complete four years of undergraduate education and **four years of post-graduate education** earning a doctorate of optometry; many complete residency programs in addition.
- + Education includes **extensive study** in ocular, head and neck and neuroanatomy; ocular disease; pathology; physiology; optics; primary patient care; pediatrics; low vision rehabilitation; and advanced procedures.
- + Optometrists obtain more than **100 class hours in pharmacology**, equal to that of physicians and dentists.
- + Optometrists receive over **10,000 hours of education and training** focused solely on the eye and the visual health system.
- + **The Ohio State University College of Optometry** is the state's only optometric education program. It is consistently ranked among the **top programs in the nation** and annually produces around 65 new practitioners. Around 60% of Ohio optometrists are graduates of OSU.
- + Doctors of Optometry engage in clinical practice that spans from traditional vision care to **medical eye health services**.
- + Optometrists are primary eye care providers who **diagnose and treat eye disease** and vision disorders. They provide care for patients of all ages starting at birth.
- + Optometrists regularly diagnose and treat: glaucoma, diabetic retinopathy, eye infections, eyelid disorders, age-related macular degeneration, retinal disorders, and cataracts.
- + Optometrists **prescribe the need for medical devices and medications**, such as topical and oral antibiotics, steroids, and Schedule II controlled substances. Practitioners are trained to deal with medication side effects and allergic reactions.
- + Doctors of Optometry fit contact lenses, glasses and other optical prosthetic devices specific to a patient's eye and medical needs. Contact lenses consider eye size, curvature, material and other individualized factors making them unique, patient-specific medical devices.
- + Optometrists are **trained to perform pre- & post-operative care**; remove foreign bodies; provide low vision care and vision therapy; and other specialized services and procedures.

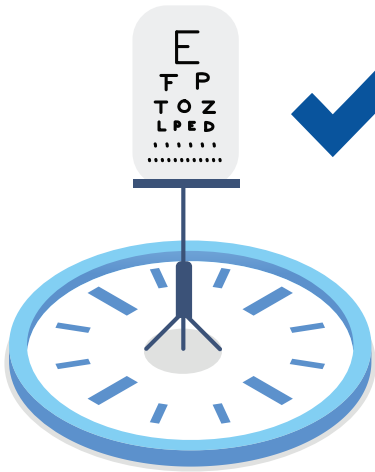
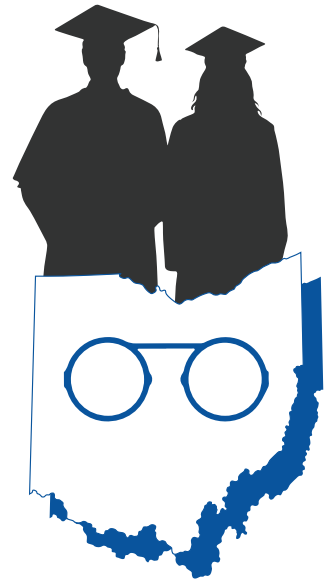


WHY SB129 IS NEEDED FOR OHIO



SB129 Will Help Ohio Maintain a Well-Trained Eyecare Workforce

- The legislation will bring Ohio in line with national standards currently taught in doctoral optometry programs.
- Aligns Ohio with scopes of practice in surrounding and similar states like Indiana, Kentucky, West Virginia, Colorado, and Virginia.
- 71% of graduating optometrists report that a state's scope of practice is a factor in determining where to practice.
- Graduates often cite the inability to practice optometry to the full scope of their training as a primary reason for leaving the state.
- Optometrists graduating from OSU College of Optometry are leaving Ohio to practice in other states that allow them to practice to their highest level of training.



SB129 Will Improve Access to Care and Decrease Wait Times

- As our population ages, it is estimated that 30% more eye care will be necessary.
- Ophthalmology is experiencing stagnant growth in new providers.
- As experts in vision and eye care, optometrists are well-equipped to fill the need – optometrists offer more expertise in eye care than physician extenders.



SB129 Will Create a More Efficient, Team Approach to the Delivery of Care

- Modernization is focused on procedures that bog down many ophthalmology practices.
- These procedures represent a small percentage of scope of ophthalmology, only around 4%.

