Opponent Testimony - S.B. 129
Monica Hueckel - Ohio State Medical Association
Senate Health Committee
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Chairman Huffman, Vice Chair Johnson, Ranking Member Antonio and members of the Senate Health Committee, my name is Monica Hueckel – I am Vice President of Advocacy for the Ohio State Medical Association. I will focus my comments on two additional topics – access to care and implications on work force.

### Impact on Access

Access to care is always a concern in today's healthcare system in Ohio and across the country. Ophthalmology and all of organized medicine are continually assessing the best way to increase the ability for patients to receive the best care when they need it in the most appropriate manner. In assessing the impact that SB 129 might have on access, a review of the data from Ohio and other states shows that there is not a significant access problem to getting these procedures done in Ohio and the experience in other states is that access hasn't increased when surgical privileges have been granted through legislative change.

We surveyed ophthalmology offices across the state and found that on average the proposed procedures can be scheduled in one week. Also, as the doctors mentioned, most of the proposed procedures are not emergent in nature and are typically best done by the surgeon who is currently seeing the patient. Additionally, based on Medicare Physician file data, 99% of Ohio's population lives within a 30 minute drive of an ophthalmologist's office (attachment A).

We also reviewed national billing data from Medicare fee for service claims and it shows for those states which have passed similar surgical expansion, very few optometrists in these states chose to perform these surgeries, and many of those who do are practicing out of ophthalmology practices, only 7.6% billed for YAG lasers and 1% billed for SLT/ALT procedures. The extremely low percentages of optometrists filing claims for performing surgical procedures is an indicator that even where it is allowed, optometric surgical experience remains low and does not provide a meaningful solution to any challenges related to access to care (attachment B).

## Impact on Work Force

Similar to access, work force is certainly a challenge across all of healthcare. Ophthalmology and organized medicine are partnering with educational institutions, state and federal government agencies and other healthcare institutions and associations to address the needs of Ohio and local communities.

However, the data shows there is no evidence that the scope of practice expansion proposed in SB 129 will meaningfully address the healthcare workforce issue in Ohio. While there are some antidotal examples, by most available data measures it is clear that Ohio isn't losing large numbers of students graduating from OSU optometry's school to surgical states and currently licensed optometrists aren't leaving for this reason either.

Over a recent 10 year period there were approximately 640 OSU optometry school
graduates and only 3 become licensed in a state that allows surgery and billed Medicare
for one of the surgical procedures being proposed. A few others have moved to surgical
states, but it doesn't appear they did so to perform surgical procedures.

- Between 2013 and 2020, there were 1,636 optometrists licensed in Ohio who filed a
  Medicare claim, none of them billed Medicare for one of the proposed surgical procedures
  in a state that allows it indicating they had moved to a state where they could do surgery
  and subsequently did a surgical procedure.
- Reviewing data from the Vision Professions Board over the last five years the number of licensed optometrists in Ohio has remained constant with no significant change.

Our healthcare workforce challenges are real and we should work collaboratively to address them, but no currently available data suggests that SB 129 is a solution.

## **Summary and Solutions**

In summary, we believe that SB 129 as drafted is a solution looking for a problem. It will not have any significant impact on the eye health delivery system in Ohio nor address healthcare workforce challenges. Rather than pursue divisive scope of practice legislation presented in SB 129, we believe there is a great opportunity for ophthalmology, optometry and policy makers to come together to address a significant need in eye healthcare in Ohio today in several different ways.

For example, a few weeks ago the governor created a Children's Vision Strike Force. This recommendation was based upon innovative work led by ophthalmology in northeastern Ohio and optometry in southeastern and southwestern Ohio to address the challenge of getting children in certain areas appropriate eye care that might be currently preventing them from learning. Expanding these programs efficiently and effectively across the state will take collective energy and focus but will result in major improvements that will benefit Ohio today and for decades to come.

Additionally, Ohio has been selected as one of the states to focus on increasing screening for diabetic retinopathy particularly in underserved communities where we know rates of diabetes are much higher. This work is being led in Ohio by the National Kidney Foundation, Prevent Blindness Ohio and the Ohio Department of Health. This presents another opportunity for a collaborative approach to significantly improve outcomes and create greater health equity in our state.

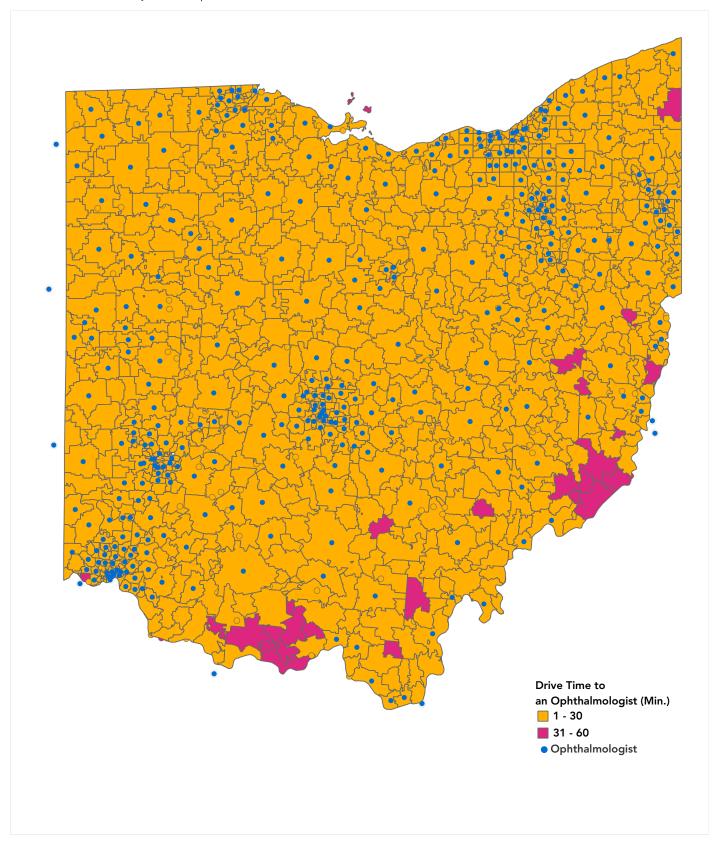
Our hope, as organizations representing ophthalmology and all of organized medicine, is that as a state we can work together as clinicians and policy makers to improve the eye health delivery system in Ohio and make care better for our patients. Thank you again for the opportunity to provide opponent testimony to SB 129 and the members of our panel will be happy to answer any questions you might have.

# Attachment A

# SB 129 would NOT improve access to surgical eye care

FACT: 99.4% of the Ohio population is 1/2 hour drive time to an ophthalmologist

Data Source: Medicare Physician Compare File, US Census



# Attachment B

### **Optometric Surgery Billing Data From Other States**

#### YAG Capsulotomies Procedure

In 2021, few optometrists filed original Medicare fee for service claims for YAG capsulotomies in the seven states for which there is data. Out of 2,198 optometrists only 167 filed a claim. (2021 data is the latest year available from this dataset. The statutes authorizing optometrists to perform lasers in Colorado and Virginia were enacted in 2022, so Medicare claims data is not yet available for these two states.)

The volume of clinical surgical experience amongst these optometrists - who already have little breadth and depth of surgical knowledge – also varies widely amongst this small subset of practitioners. For example, in 2021,17 of the 167 optometrists (10.2%) filing Medicare Part B Fee for Service claims for YAG capsulotomies, performed 38.2% of the YAG capsulotomies performed by optometrists. Specifically in Kentucky, 5 of the 39 perform 50% of the YAG procedures done in the state.

State*	Total No of OD FFS Claimants	No. of OD Claimants Filing Claims for Performing Yag Capsulotomies (CPT Code 66821)	Percentage of Total Claimants Filing Claims for Performing YAG Capsulotomies
AK	114	2	1.75%
AR	352	9	2.56%
KY	501	39	7.78%
LA	272	18	6.62%
MS	293	14	4.78%
ОК	565	83	14.69%
WY	101	2	1.98%
TOTAL	2198	167	7.6%

<sup>\*</sup>Medicare Fee for Service Claims data is not yet available for CO and VA.

### **SLT/ALT Procedures**

For the glaucoma procedures (SLT/ALT) proposed in the Ohio legislation, there are few if any optometrists performing these procedures in states that have passed legislation. Out of 2,198 optometrists only 23 filed a claim – about 1%. Specifically in Kentucky, only 10 or .2% filed a claim.

Similar to the YAG data, a significant amount of procedures performed are concentrated with a small amount of optometrists. For example, 2 of the 23 optometrists (9%) filing Medicare Part B Fee for Service claims for SLTs/ALTs, performed 21% of these laser surgeries performed by optometrists.

State*	Total No of OD FFS Claimants	No. of OD Claimants Filing Claims for Performing SLTs/ALTs (CPT Code 65855)	Percentage of Total Claimants Filing Claims for Performing SLT/ALTs (CPT CODE 65855)
AK	114	0	0%
AR	352	3	.85%
KY	501	10	.20%
LA	272	1	.37%
MS	293	0	0%
ОК	565	9	1.59%
WY	101	0	0%
TOTAL	2198	23	1.05%

<sup>\*</sup>Medicare Fee for Service Claims data is not yet available for CO and VA.