

OHIO OPTOMETRIC ASSOCIATION 250 E. Wilson Bridge Rd, Suite 240 Worthington, OH 43085 614-781-0708 • FAX 614-781-6521 info@ooa.org

Testimony Supporting SB 129 Senate Health Committee Elizabeth Muckley, O.D. Executive Director of the Ohio Optometric Association April 24, 2024

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

On behalf of the members of the Ohio Optometric Association and the patients we serve, I want to thank you for the opportunity to speak to you today in support of Senate Bill 129, legislation that will simply modernize and update the optometric scope of practice in Ohio. Our members are very appreciative of the hard work that Senator Cirino has exhibited as the sponsor of our bill and truly appreciate Chairman Huffman and members of this committee for today's hearing.

My name is Dr. Elizabeth Muckley, and I am the new Executive Director of the Ohio Optometric Association which represents 70% of practicing optometrists in Ohio. Prior to becoming the OOA Executive Director 2 months ago, I was the Director of Optometric Services at NE Ohio Eye Surgeons in Akron and Kent, Ohio where I practiced collaboratively with both ophthalmologists and optometrists for 23 years. I concentrated in the medical treatment of glaucoma, ocular surface and corneal disease, and post-operative surgical care. I was personally responsible for over 6000 patients in a practice of 56,000. I am a Clinical Associate Professor of Practice at the OSU College of Optometry and previously precepted 4th year optometry students in their advanced practice clinical rotation in my office. I held hospital privileges at University Hospitals of Cleveland Portage Medical Center where I took ophthalmology calls for the emergency department for 23 years. I am a Past President of the Ohio Optometric Association and co-author of the 3rd edition textbook of the Primary Care of the Anterior Segment, where I wrote an 88-page chapter in the diagnosis, management, and pharmacologic and surgical treatment of glaucoma.

Before I make a few brief comments on SB 129, I want to note that a small panel of expert optometrists and two current optometric students at The Ohio State University College of Optometry will follow my testimony to address specific topics contained in this important legislation and provide information regarding patient safety, qualifications, and other issues that were discussed during Senator Cirino's testimony at our last hearing. In addition, included with my testimony are several pieces of information and data from other states that have updated their optometric scopes of practice to show these procedural and scope updates have been done safely and have not caused patient harm.

For many years, the Ohio General Assembly has entrusted optometrists to treat patients safely and effectively. Whether it was optometry's partnership to proactively provide comprehensive eye exams for students on an Individualized Education Plan (IEP) or providing vision services to Ohio's Medicaid patients at one of the top participation rates of any provider group, Ohio's legislature has entrusted our profession with safely and effectively taking care of your constituents.

In addition, many on this committee and throughout the legislature reaffirmed your trust in our profession through the creation of two state-funded programs in the last two biennial budget bills to take needed eye care services directly to children in their local communities. Ohio's optometrists also stand ready to help Governor DeWine and the General Assembly implement the proposed "Children's Vision Strike Force" unveiled by the Governor in his recent State of the State address.



SB 129 would be the first update to our profession's scope of practice in over 15 years. We can all recognize that the delivery of health care is not the same as it was in 2008 due to technological advancements and improvements. Other health care providers such as pharmacists, nurses, and physician assistants have all taken on additional roles in the health care delivery system through practice updates granted by the Ohio General Assembly. Likewise, we believe the optometric profession should have the ability to grow and evolve as skills expand to provide patients with the highest quality care available.

I would also like to reassure this committee that Ohio's optometrists would NEVER propose any change to Ohio law that would compromise the safety of our patients and your constituents. To do so would be a direct betrayal of the trust this General Assembly has shown the optometric profession. In fact, past periodic updates in our scope of practice have proven this very point despite claims from opponents that patient harm would occur due to those practice changes. Those threats never materialized any time the optometric scope of practice was revised, and we believe patients were much better served by our members.

Let me also clarify that the contents of SB 129 are the result of over two years of analysis by leaders within our own profession in evaluating sensible scope enhancements that would better serve our patients. Despite other states pursuing more aggressive scope expansions, Ohio optometrists responsibly placed the safety of and benefit to patients above all else and are recommending reasonable updates that would improve access to eye care services to patients.

When developing SB 129, the OOA proactively reached out to ophthalmology to discuss what our proposal would entail to see if there was any opportunity to reach a consensus. OOA board members, led by my predecessor, past OOA Executive Director Keith Kerns, met directly with ophthalmology leadership on several occasions to discuss which proposals would be reasonable scope enhancements to update the laws governing optometry. This included seeking their input to provide recommendations as well as discussing educational requirements, training, and public safety of these procedures and prescribing changes. It is my understanding that those discussions between our organizations were professional and informative, but in the end, we were unfortunately unable to reach agreement on any of these points. The OOA also shared the draft of SB 129 and relayed the proposed pharmaceutical changes contained in the bill with the Ohio Board of Pharmacy. The Pharmacy Board expressed no opposition to the language.

The relationship between optometrists and ophthalmologists in Ohio is one of collaboration and teamwork. Our members often work alongside ophthalmologists in the same practice. They share knowledge and expertise which benefit patients and provide optimal outcomes. However, as most of you know, scope of practice bills are generally tough to navigate for both parties and legislators alike.

The Ohio Optometric Association and its members believe updates in the law are necessary and will improve access to vision care, decrease wait times, create a more efficient team approach to the delivery of eyecare in a time of healthcare shortages, and help Ohio maintain a well-trained eyecare workforce. As healthcare shortages continue and our population ages, there is higher demand for care. Barriers to care for specialty services like ophthalmology, such as travel time and distance, loss of work time, excessive wait times for appointments as well as in-office wait times are increasing. According to a report in the American Journal of Ophthalmology, the US Dept. of Health and Human Services forecasts a sizeable shortage of ophthalmology supply relative to demand by 2035. Ophthalmology is one of the medical specialties with the lowest rate of projected work force adequacy with an expected 12% decline coupled with a 24% increase in demand. This disparity is even more pronounced in rural areas where there is projected to be a 29% workforce adequacy compared to 77% in metro areas by 2035. Optometrists are well-



equipped to fill this need since Doctors of Optometry offer more expertise in eyecare than physician extenders and are practicing in 86 of the 88 Ohio counties.

Proposed updates in SB 129 include procedures to remove benign eyelid lesions, perform three non-invasive laser procedures, and remove antiquated categories of oral pharmaceutical prescribing currently in our code. It also will give authority to the Ohio Vision Professionals Board to establish necessary training and infection control standards. To briefly describe to the committee the proposed procedures contained in SB 129, the committee will hear from Dr. Aaron Zimmerman, an Associate Clinical Professor at The Ohio State University College of Optometry. Dr. Zimmerman has been the instructor of record at OSU for lasers, injections, and minor surgical procedures since 2012 and will share his personal experience in this role.

As I mentioned earlier, SB 129 is meant to allow Ohio optometrists better serve their patients but will also bring Ohio closer in line with national standards taught in all doctoral optometry programs across the county, including The Ohio State College of Optometry. We are very fortunate to have the OSU College of Optometry in Ohio, as it is often viewed as the top optometry school in the country. Currently, 12 states permit optometrists to perform those three laser procedures and 20 states allow for various benign lid procedures, provisions that are included in SB 129. Our neighboring states of Kentucky, Indiana, Wisconsin, Virginia, and West Virgina allow some or all the procedures contained in SB 129 and have a proven safe track record when performed by optometrists.

Ohio's current optometric statutes do not reflect the full training and education of optometrists today. Our students will soon enter the workforce, ideally in Ohio, but Ohio faces intense competition to retain these top graduates from states that allow their optometrists to do more. Many students from The Ohio State University College of Optometry are strongly considering leaving Ohio after graduating to pursue further precepted hands-on training on live subjects and certification in those neighboring states, and subsequently do not return to Ohio for practice. If Ohio is truly "open for business," and our state wishes to maintain the highest quality workforce, we strongly believe SB 129 will help accomplish this goal in quality vision care.

To further address this important point on workforce retention and student recruitment, among the small panel following me today will be Dr. Michael Earley, Associate Dean for Academic Affairs at the OSU College of Optometry as well as optometry students Emily Benson and Juliana Mazzotta. Dr. Earley will discuss from his own personal perspective the ongoing recruiting and retention challenges he faces in admission due to our current scope limitations. Students Emily and Juliana will share their post-graduation plans and how Ohio's current scope may impact those choices.

Another factor influencing the need to change the current scope of practice in Ohio concerns the optometrists that practice on or near the border of neighboring states that have enhanced scope laws. Some of our members hold dual licenses in both states and **may already perform the procedures proposed in SB 129 in their offices across the border** (such as in Kentucky or Indiana), but not in their Ohio offices (such as in Portsmouth). Dr. Taylor Babcock, an optometrist who is a constituent of Vice Chairman Johnson and is licensed in both Ohio and Kentucky will speak later on how this challenge affects his patients and practice.

Lastly, as a former clinician who worked alongside busy ophthalmologists and provided collaborative care in managing the patients that would be seeking the care outlined in SB 129, I am also ready to answer your questions.

Mr. Chairman, Vice Chairman Johnson, and Ranking Member Antonio, thank you for allowing me to testify today in support of SB 129 on behalf of the Ohio Optometric Association. With the chairman's permission, I would like to turn things over to Dr. Zimmerman.





Department of Commerce, Community, and Economic Development

BOARD OF EXAMINERS IN OPTOMETRY

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October 11, 2021

The Honorable Mark Sickles (Delegate) Pocahontas Building 900 E. Main St, Richmond, Virginia

Dear Delegate Sickels,

The Alaska Board of Examiners in Optometry has received no complaints regarding care rendered following the signing of CSHB103(FIN) into law on July 26, 2017 and the subsequent statute change of AS 08.72.278 and integration of regulation 12 AAC 48.040 that expanded optometric scope of practice in Alaska to allow increased access to care throughout the state of Alaska.

The Alaska Board of Examiners in Optometry continues to judiciously and carefully monitor all aspects of optometric care for the benefit of the citizens of Alaska.

Sincerely,

Damien R. Delzer, O.D., DiplABO Chair, Alaska Board of Examiners in Optometry



COMMONWEALTH OF KENTUCKY **BOARD OF OPTOMETRIC EXAMINERS CARSON KERR, EXECUTIVE DIRECTOR** 2365 HARRODSBURG ROAD, SUITE A240 LEXINGTON, KY 40511 PHONE: (859) 246-2744 FAX: (859) 246-2746

August 31, 2021

Dear Delegate Sickles,

In 2011 the Kentucky Legislature passed Senate Bill 110 or the "Better Access to Quality Eye Care" bill. The Kentucky law became effective on June 8, 2011 and constituted an expansion of Optometrists' scope of practice which allowed Kentucky Optometrists to perform certain laser procedures, remove benign lesions from the eyelid and granted increased authority to allow medicines to be delivered by injections or other appropriate forms. The law also allowed the Kentucky Board of Optometric Examiners the authority to determine the scope of optometric practice in Kentucky outside of the procedures excluded in KRS 320.210. To date the Kentucky Board of Optometric Examiners has credentialed over 410 Optometrists to perform expanded therapeutic procedures. This law has been successful in delivering much needed medical eye care to underserved areas of the state as Optometrists credentialed in expanded therapeutic procedures practice in over 75% of Kentucky's 120 counties.

To date, there have been over 40,000 laser and surgical procedures performed in Kentucky by Optometrists. The Board of Optometric Examiners has received no complaints and has not heard of any adverse outcomes relating to the performance of this expanded scope of practice.

Furthermore, there was no increase in malpractice rates with the passage of SB110. There is no difference in malpractice rates between Optometrists in Kentucky who have extended therapeutic privileges and those who do not and there is no difference in malpractice rates between Kentucky Optometrists and Optometrists in surrounding states without extended therapeutic privileges.

I hope this information has been helpful and should you require any additional information, please let us know.

Sincerely,

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Jonathan Shrewsbury, OD President, Kentucky Board of Optometric Examiners



Louisiana State Board of Optometry Examiners

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August 04, 2021

The Honorable Mark Sickles (Delegate) Pocahontas Building 900 E. Main St. Richmond, VA. 23219

Re: La. Optometric Laser Procedures

Dear Delegate Sickels,

In response to your request, I can report that Louisiana Act 398 of the 2014 Louisiana legislature expanded the scope of practice of Optometry allowing Doctors of Optometry who qualified, with additional training, to perform advanced ophthalmic surgery procedures, including laser procedures.

In promulgating the rules to administer the act, the Louisiana State Board of Optometry Examiners (LSBOE) included a provision that all Doctors of Optometry who perform laser procedures were required, as a provision of renewal of their license to practice Optometry, to keep a log of the number of laser procedures performed, and any adverse outcomes noted, and report that to the Board.

Of the 480 Doctors of Optometry practicing in Louisiana, 313 have become certified to perform the procedures to date.

The data from the years 2015-2020 show that Louisiana Doctors of Optometry have performed 14,311 laser procedures with zero negative outcomes reported.

In addition, there have been no complaints to the Board regarding Doctors of Optometry performing these procedures from patients or other doctors, and the Board is not aware of any malpractice suits filed regarding this. Jeff Anastasio, O.D. Covington, La President

Gary Avallone, O.D. Ruston, LA Secretary

Dale Benoit, Belle Chasse, LA Consumer Member

Gerald Gerdes, O.D. Oakdale, LA Member

James Sandefur, O.D. Oakdale, LA Member

Christopher Wroten, O.D. Denham Springs, LA Member The LSBOE participates with the National Practitioner Data Bank/Health Care Integrity and Protection Data Bank (NPDB/HIPDB) in sharing data regarding Doctors of Optometry and any disciplinary actions committed or reported. The LSBOE has received no communication from the NPDB/HIPDB regarding any malpractice suits, licensure suspension/revocations or other adverse actions regarding Louisiana Doctors of Optometry performing these advanced ophthalmic surgical procedures including laser procedures.

It is clear to the Board that the law has been of great benefit to the citizens of Louisiana, allowing greater access to these procedures, especially in the rural areas of the state.

If I can be of further assistance, please feel free to contact me at any time.

Sincerely,

Dr. James D. Sandefur

Secretary

La. State Board of Optometry Examiners



Board of Examiners in Optometry State of Oklahoma Office of the Executive Director

January 6, 2022

Chairman of the Health Committee Pocahontas Building 900 E. Main St, Richmond, Virginia 23219

To the Chairman of the Health Committee,

In 1988 laser training was provided to optometrists at a joint meeting with ophthalmologists. Language in the Optometric Scope of Practice was interpreted to allow the Oklahoma Board of Examiners in Optometry to certify those who had received this laser training to perform laser surgery procedures. Between 1988 and 1998 the Board required the reporting of post-laser procedure outcomes and there were approximately 5,000 laser procedures performed with no negative outcomes.

Legislation, which took effect November 1, 1998, authorized the statutory definition of optometry to include laser surgery procedures. Since 1998 there have been an additional estimated 50,000 laser surgery procedures in which there were no complaints registered. The Board has been informed there were only two (2) insurance settlements made involving PRK. In those two cases a confidentiality agreement was in place. In total, Optometrists in Oklahoma have been providing laser surgery procedures for 32 years.

Additionally, laser eye care is provided by optometrists in a majority of the 77 counties in the State of Oklahoma. The accessibility of this care provides an economical benefit to the citizens of the state since travel expenses are greatly reduced. Oklahoma optometrists may also work together in the same offices as ophthalmologists. These optometrists provide care at the level of their laser certification. Insurance providers authorize payments for laser procedures for Oklahoma licensed optometrists which includes senior citizens covered by Medicare.

Today laser training is provided to students of optometry in all Colleges of Optometry, most of which are state supported. The Oklahoma Board of Optometry certifies all optometrists upon successful passing of Oklahoma State Board Exams. The laser exams are conducted at the time of the annual Board Exams. The National Board of Examiners (NBEO) provides laser testing on the laser education being taught in optometry schools for state Boards of Optometry.

Dr. David Cockrell, President 1711 West 6th Street Stillwater, Oklahoma 74076 Dr. M. Patrick Day, Vice-President 565 South 30th Clinton, OK 73601 Dr. Selina McGee, Board Member 200 W Covell Edmond, OK 73003

Dr. D. J. Riner, Board Member 9720 E. 31st St., Suite A-1 Tulsa, Oklahoma 74146 James Coburn, Secretary-Treasurer PO Box 1665 Muskogee, Oklahoma 74402 Optometrists practicing in Veteran hospitals through the nation routinely provide laser procedures to our veterans if the optometrist's scope of practice by licensure will allow. Therefore, many optometrists practicing in VA hospitals will have an Oklahoma optometry license or license from another state that has an equivalent scope of practice.

The Board of Examiners in Oklahoma no longer requires ophthalmic laser treatment reporting since this is a routine procedure in optometric offices in our state.

Oklahoma optometrist's malpractice insurance rate is listed as one of the lowest in the nation.

Sincerely,

Russell Loverty. 00.

Russell Laverty, OD, Executive Director Oklahoma Board of Examiners in Optometry





GEOGRAPHIC DISTRIBUTION OF EYE CARE PROVIDERS IN OHIO



Compiled by The American Optometric Association from 2024 data on Licensed Ohio Optometrists as well as data from the American Medical Association