House Bill 22-1233: Optometric Practice Act Sunset & Reauthorization

Rep. Lontine & Rep. Soper

WHAT IS THE ROLE OF AN OPTOMETRIST?

Optometrists provide primary care for the eyes. With four years of post-graduate education, a Doctor of Optometry (OD) degree provides extensive classroom, laboratory, and clinical training. In Colorado, optometrists with an active license must also complete at least 24 hours of continuing education (CE) every two years.

WHAT ARE SOME OF THE MODERNIZATIONS COLORADO'S **OPTOMETRISTS WOULD LIKE TO SEE TO THEIR PRACTICE ACT?**

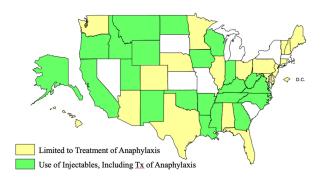
- 1. Current barriers in Colorado's Optometric Practice Act prevent optometrists from using their full training and set of skills. The 2021 DORA sunset report agrees. It states, "When practice acts are written in such a manner, they can have an unintended consequence of stifling innovation and ultimately hurting consumers. The effect of the Act, in its current form, is that ODs are not allowed to practice up to the level of their education and training. In this case, regulation is too restrictive and does not promote the optimum use of personnel."
- 2. These barriers result in costly inconveniences for patients and may prevent those patients from accessing the full range of care needed. It also exacerbates Colorado's rural/urban divide because rural patients often need to unnecessarily travel to obtain medical care that could be safely completed at their local optometrist office.
- 3. The 2022 sunset and reauthorization of the Act provides an opportunity to increase patient access to care and utilize the full education and training of optometrists.

WHAT ARE SOME EXAMPLES OF WHY REVISIONS ARE NEEDED?

Injections privileges:

- Currently, Colorado's optometrists are not permitted to administer treatments or tests via injection. Injections are part of an optometrist's training and could improve patient care by allowing in-office treatments and blood tests.
- Optometrists were given emergency authorization to administer COVID-19 vaccines. They accumulated 364 volunteer hours and successfully vaccinated over 2,730 Coloradans.
- Colorado's statute is falling behind other states, which is a detriment to patient care.

Injectable Authority:





Glaucoma treatment:

- Optometrists diagnose and treat glaucoma routinely.
- As technologies advance, new non-invasive treatments and drug delivery systems are expected.
- Current language limits treatment by optometrists to oral and topical medications and would prevent utilization of new advancements in treatments.

In-Office Procedures:

- Optometrists are trained to do several in-office procedures that do not require systemic anesthesia
 and can be treated with little to no recovery time. Examples include the removal of chalazia or skin
 tags. With an updated Practice Act, these procedures can safely be done in an optometry office
 (rather than referred to a surgeon). The 2021 DORA report asserts, "These are brief procedures
 with minimal to no recovery time. Because an OD is a trained professional, risk to the patient is
 virtually nonexistent."
- As recommended by DORA, competency for these procedures can be determined through national standardized testing and additional rules passed by the State Board of Optometry.
- Once again, Colorado is falling behind other states, setting back patient care. KY, LA, AR, AK, ID, TN,
 OR, GA, MS and our neighboring states of NM, OK, and WY all include these in-office procedures
 within the optometry scope of practice.
- In conjunction with the 2021 sunset review, the Colorado Office of Policy, Research, and Regulatory Reform (COPRRR) found that there has been **NO** increase in regulatory actions taken against practitioners in other states where optometrists are performing these procedures. Our Practice Act, along with many other states', has it written into law that ODs are held to the same standard of care as other licensed professionals.
- Due to the current statutory barriers, wait time for removal of these lesions can be long and burdensome for patients, especially those in rural Colorado who have limited treatment options and increased travel burden. The DORA report confirms, "Access to eye care professions in rural CO is lacking. A patient should not be forced by Colorado law to see a different professional for minor procedures. This is especially the case when a trained professional is in the room making the diagnosis and advising the patient. Forcing a patient to expend extra time and resources to unnecessarily see an additional specialist appears to be statutory overreach when viewed through the lens of the sunset criteria."

WITH THE 2022 SUNSET REVIEW, COLORADO HAS AN OPPORTUNITY TO IMPROVE PATIENT CARE AND ACCESS TO EYE CARE.

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