

DRS. HAWKS, BESLER, ROGERS & STOPPEL



OPTOMETRISTS

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TO: Senate Public Health & Welfare Committee

From: Jason Rogers, OD

RE: SB 490

As an optometrist with practices in Gardner, KS and Overland Park, KS, I am requesting your support of Senate Bill 490, which seeks to update the Optometric Scope of Practice Act to reflect optometric education and training.

This bill would allow Kansas optometrists to provide in-office eye lid procedures and three specific in-office laser procedures for patients. Eleven other states have language similar to this bill in their practice acts and optometrists in those states have provided more than 100,000 of these procedures. While opponents of the bill cite lack of training and concerns about patient safety, this issue really is about the fact that there are unwarranted restrictions on optometric scope of practice. I obtained my Doctor of Optometry degree and became licensed in Kansas in 1995. I also obtained and have retained my Oklahoma license. I could go to Oklahoma this afternoon and legally provide the services outlined in this bill to a patient in Oklahoma, where optometrists have been allowed to provide these services for decades. The same doctor, with the same education and training—but one state allows me to provide these procedures to patients while Kansas does not. There are other Kansas optometrists who are also dual-licensed and are able to provide these procedures in a state with modernized scope of practice .

When I graduated, I decided to return to Kansas to practice because of my desire to be near family. I hoped that Kansas would soon allow optometrists to practice to the level of their education and training, but instead, 29 years later, I am still unable to do so. Now that I am considering plans for the future of my practice, I am working to recruit optometrists to join my practice. We hear from many students that they desire to practice in a state where they can practice to the level of their training. I fear that if we do not address this disparity in scope of practice soon, we may see our best and brightest Kansas students not returning to the state.

The opponents to the bill cite safety concerns. I want to be clear that these procedures can lead to known and also unexpected complications—we recognize they occur and have been properly managing the complications for years. But these can occur regardless of who is providing a procedure. The key is a provider knowing his or her limitations and knowing how to address any complications that arise, whether known or otherwise. Optometrists currently provide pre- and post-operative care for many surgeries performed by ophthalmologists and have been appropriately managing post-operative complications for decades.

These safety concerns are not reflected in malpractice rates. The malpractice rates for Kansas optometrists are identical to those states with scope consistent with what we are seeking in Kansas, such as Oklahoma. If there were a significant number of safety concerns in Oklahoma, it only makes sense that their malpractice rates would be higher, which is simply not the case. In addition, data from the National Practitioner Data Bank also shows that of the more than 8,900 medical malpractice cases in Kansas since 1990, only eight were from optometrists - only 0.09 % - and the last reported optometry case was in 2011. These facts demonstrate that Kansas optometrists have a long history of providing safe, appropriate eye care.

I ask you to support SB 490 to allow optometrists in Kansas to practice to the level of their education and training.