

HOUSE BILL REPORT

HB 2079

As Reported by House Committee On:
Health Care

Title: An act relating to authorizing dispensing opticians to perform eye refraction and modify existing prescriptions to reflect changes in vision.

Brief Description: Creating a program to certify refracting opticians.

Sponsors: Representatives Schual-Berke and Campbell.

Brief History:

Committee Activity:

Health Care: 2/20/01, 2/22/01 [DPS].

Brief Summary of Substitute Bill

- A licensed dispensing optician may apply to the Secretary of Health for an endorsement as a refracting optician in order to modify patient eye prescriptions, limited to a plus or minus 2.00 diopter of change.

HOUSE COMMITTEE ON HEALTH CARE

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 11 members: Representatives Campbell, Republican Co-Chair; Cody, Democratic Co-Chair; Schual-Berke, Democratic Vice Chair; Skinner, Republican Vice Chair; Alexander, Conway, Darneille, Edmonds, Edwards, McMorris and Pennington.

Minority Report: Do not pass. Signed by 3 members: Representatives Ballasiotes, Marine and Ruderman.

Staff: John Welsh (786-7133).

Background:

Dispensing opticians are licensed as a health profession by the Department of Health to fit and dispense contact and eyeglass lenses upon the written prescription of physicians and optometrists. Opticians fabricate eyeglass lenses, as well as measure and adapt contact lenses and eyeglasses to the human face.

Current law does not authorize dispensing opticians to modify prescriptions.

The Dispensing Optician Examining Committee is composed of three members who are licensed dispensing opticians.

Summary of Substitute Bill:

A dispensing optician may apply to the Secretary of Health for an endorsement as a refracting optician for the purposes of modifying prescriptions as specified in this act. Qualifications for obtaining an endorsement include completion of 80 hours of accredited course work; performing at least 200 hours of supervised refractive eye examinations; completion of a continuing education requirement; and passage of an examination.

Refracting is defined as a means of measuring the powers or range of a person's vision to determine the degree of correction.

Prescription modification is defined as the ability to alter a prescription with a cumulative plus or minus 2.00 diopter of change, with only 1.00 diopter of change during a 6-month period.

Only those patients who have had an eye examination within the last two years may have their prescriptions modified, but children ten years of age or under or adults 65 years of age or older may not have their prescriptions modified. A patient must sign a disclosure statement recognizing that a prescription modification is not, nor does it replace, an eye examination.

In modifying a prescription, the optician must notify the original prescriber within 14 days of any modifications. Refracting opticians must refer patients to an optometrist or ophthalmologist if the optician is unable to select specified lenses or observe changes in power of either eye.

Refracting opticians who are unable to select specified lenses or observe specified changes in power in either eye must refer patients to an optometrist or ophthalmologist.

The Dispensing Optician Examining Committee is increased from three to five members, of which four members are licensed opticians and one is a representative of the public.

Substitute Bill Compared to Original Bill:

A July 1, 2002, effective date is added for sections 2, 4, 5, 6 and 8.

Appropriation: None.

Fiscal Note: Requested on February 19, 2001.

Effective Date of Substitute Bill: Ninety days after adjournment of session in which bill is passed, except for sections 2, 4, 5, 6 and 8 which take effect July 1, 2002.

Testimony For: Consumers have increased choice and access to health care without endangering patient safety. The public may benefit from having an additional intervention by an ocular health care provider encouraging comprehensive eye exams on a routine basis. Additional education and training will ensure competency.

Testimony Against: Subjective refraction is not designed to detect or treat eye injuries or diseases. Stand-alone refractions present health risks, and may deter comprehensive examinations every four years. Good visual acuity does not necessarily equate with good health.

Testified: (In support) Lisa Thatcher and Tim Alden, Opticians Association of Washington.

(Against) Mike McCown, Washington Association of Optometric Physicians; and Cheryl Johnson, VSP.