

SENATE BILL REPORT

SB 6000

As Reported By Senate Committee On:
Health & Long-Term Care, February 27, 2001

Title: An act relating to authorizing optometrists to use and prescribe approved drugs for diagnostic or therapeutic purposes without limitation upon the methods of delivery in the practice of optometry.

Brief Description: Authorizing optometrists to use and prescribe approved drugs for diagnostic or therapeutic purposes without limitation upon the methods of delivery in the practice of optometry.

Sponsors: Senators Thibaudeau, Hale, Deccio, B. Sheldon, Costa, Sheahan, Hochstatter, Regala, Kastama, McAuliffe, Morton, Kohl-Welles, Finkbeiner, Jacobsen, Honeyford, Swecker, Prentice, Long, Winsley, Benton, Fraser, Oke, Hargrove, Spanel, Shin, Stevens, McCaslin, Fairley, Zarelli, Constantine, Brown, Patterson, Gardner and Franklin.

Brief History:

Committee Activity: Health & Long-Term Care: 2/26/01, 2/27/01 [DPS].

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: That Substitute Senate Bill No. 6000 be substituted therefor, and the substitute bill do pass.

Signed by Senators Thibaudeau, Chair; Franklin, Vice Chair; Costa and Fraser.

Staff: Joan K. Mell (786-7447)

Background: Optometry is the examination and ascertaining of any defects of the human vision system and the analysis of the process of vision. Under present law, optometrists can treat with topically applied drugs, but cannot inject drugs nor prescribe medication for oral use.

In November of 1996, the Department of Health issued an Optometrist Prescriptive Authority Sunrise Review. The report concluded optometrists should be allowed to dispense and prescribe non-topical drugs and controlled substances specifically limited to those drugs necessary to treat diseases or conditions of the eye that are within the scope of practice of optometry for a period of seven days for any single condition.

Summary of Substitute Bill: The practice of optometry is redefined to include the treatment of the human eye and adnexa.

Optometrists can obtain a certification to prescribe drugs administered orally or other means of delivery for therapeutic purposes in the practice of optometry if they complete an additional 8 hours of clinical and 16 hours of didactic instruction as established by the board and certification from an institution of higher learning. The Optometry Board must establish

a list of schedules II-V controlled substances in consultation with the Board of Pharmacy that may be used according to guidelines. An additional ten hours is required for use of drugs by injection. Drugs may not be injected into the eye. The prescription or administration of drugs is limited to seven days for a single condition and to drugs appropriate to the treatment of diseases or conditions of the vision system within the scope of practice of optometry.

The optometry board is given rule-making authority.

Optometrists are added to the list of practitioners in the Controlled Substances Act, and are given prescriptive authority under the legend drugs provisions.

The provisions of the bill are not intended to authorize retinal repair surgery or laser surgery, or use of schedule I controlled substances.

Substitute Bill Compared to Original Bill: The reference to human vision system is eliminated and replaced with the term adnexa. Four hours of instruction are added. Additional instruction is required for authorization for administration of drugs by injection. A list of approved drugs must be developed in consultation with the Board of Pharmacy. Reference to optometric physician is eliminated. Use of drugs for related conditions are amended to specify for pain related to the condition. Injections into the eyeball are prohibited. The bill precludes interpretation of the provisions to include laser surgery or retinal repair surgery.

Appropriation: None.

Fiscal Note: Not requested.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Testimony For: Optometrists support the legislation, and they have comparable education as medical and dental students relative to pharmacology and basic sciences. The bill is not about laser or surgery. The bill provides for appropriate and timely care that is cost effective. Military optometrists are able to provide the level of care authorized in the bill. Medicaid physicians have misrepresented in their materials the academic requirements of their program.

Testimony Against: The bill poses unnecessary risk to patient health and safety. Optometrists and ophthalmologists have substantially different training. There are insufficient limits on prescriptive drugs and expansion of their scope to the human vision system. There are concerns about delegation of too much authority to the Board of Optometry.

Testified: Robert W. Nash, WAEPS (con); Andy Dolan, Katie Jacoy, Aaron Weingsist, M.D., WAEPS (con); Jerry Farley, Linda Casser, O.D., Kathy Yary Williams, O.D., Paul Williams, O.D., Chris Babin, O.D., WAOP; Brett Llewellyn, WAOP (pro); Maynard Pohl, Pacific Cataract & Laser Institute (pro).