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## SENATE BILL 5542

State of Washington 67th Legislature 2022 Regular Session

By Senators Cleveland, Rivers, Conway, Lovick, and Robinson

Prefiled 12/14/21. Read first time 01/10/22. Referred to Committee on Health & Long Term Care.

- AN ACT Relating to the practice of optometry; and amending RCW 18.53.010, 18.54.030, 18.54.060, 18.54.050, and 18.54.070.
- 3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 4 Sec. 1. RCW 18.53.010 and 2015 c 113 s 1 are each amended to 5 read as follows:
  - (1) ((The practice of optometry is defined as the examination of the human eye, the examination and ascertaining any defects of the human vision system and the analysis of the process of vision. The practice of optometry may include, but not necessarily be limited to, the following:
  - (a) The employment of any objective or subjective means or method, including the use of drugs, for diagnostic and therapeutic purposes by those licensed under this chapter and who meet the requirements of subsections (2) and (3) of this section, and the use of any diagnostic instruments or devices for the examination or analysis of the human vision system, the measurement of the powers or range of human vision, or the determination of the refractive powers of the human eye or its functions in general; and
  - (b) The prescription and fitting of lenses, prisms, therapeutic or refractive contact lenses and the adaption or adjustment of frames and lenses used in connection therewith; and

p. 1 SB 5542

1 (c) The prescription and provision of visual therapy, therapeutic aids, and other optical devices; and 2

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- (d) The ascertainment of the perceptive, neural, muscular, or pathological condition of the visual system; and
- (e) The adaptation of prosthetic eyes)) (a) The practice of optometry is defined as the evaluation of ocular health and refractive state, diagnosis, and treatment of the eye and its appendages to correct and relieve ocular abnormalities in any authorized manner, including, but not limited to:
- (i) Prescribing and adapting lenses, contact lenses, spectacle eyeglasses, prisms, other ocular devices, and of administration of 11 pharmaceutical agents;
- 13 (ii) The use of oral, topical, and other medications to treat and relieve disease or abnormalities of the ocular tissues and ocular 14 15 adnexa;
  - (iii) The prescription and provision of visual therapy, ocular exercises, visual rehabilitation therapy, subnormal vision therapy, orthoptics, and the adaptation of prosthetic eyes;
  - (iv) Ordering necessary diagnostic lab or imaging tests and the dispensing of samples to initiate treatment;
  - (v) Performing nonpenetrating ocular foreign body removal or debridement of tissue by any means, epilation of misaligned eyelashes, placement of punctal or lacrimal plugs, dilation and irrigation of the lacrimal system, placement of biologic membranes, orthokeratology, prescription and fitting of contact lenses with the purpose of altering refractive error, or other similar procedures;
  - (vi) The use of diagnostic or therapeutic instruments utilizing laser, ultrasound, or other technology in the performance of primary eye care; and
    - (vii) Other ophthalmic surgery procedures, except those listed in (c) of this subsection, that are within the scope of the licensee's education and training taught by an accredited school of optometry and authorized by regulations adopted by the board of optometry which demonstrate the licensee's proficiency in performing the procedure.
  - (b) "Ophthalmic surgery procedures" means a procedure upon the human eye in which in vivo human tissue is injected, cut, burned, frozen, sutured, vaporized, coagulated, or photodisrupted by the use of surgical instrumentation such as, but not limited to, a scalpel, cryoprobe, laser, electric cautery, or ionizing radiation.
    - (c) The practice of optometry does not include:

p. 2 SB 5542

1 (i) Retinal laser procedures, laser-assisted in situ keratomileus, photorefractive keratectomy, laser epithelial 2 3 keratomileusis, or any forms of refractive surgery; (ii) Penetrating keratoplasty, corneal transplant, or lamellar 4 5 keratoplasty; 6 (iii) The administration of general anesthesia; 7 (iv) Surgery performed with general anesthesia; (v) Laser or nonlaser injection into the vitreous chamber of the 8 9 eye to treat any macular or retinal disease; (vi) Surgery related to the removal of the eye from a living 10 11 human being; (vii) Surgery requiring a full thickness incision or excision of 12 the cornea or sclera other than paracentesis in an emergency 13 14 situation requiring immediate reduction of the pressure inside of the 15 eye; 16 (viii) Surgery requiring incision of the iris and ciliary body, 17 including <u>iris diathermy or cryotherapy;</u> 18 (ix) Surgery requiring incision of the vitreous or retina; (x) Surgical extraction of the crystalline lens; 19 20 (xi) Surgical intraocular implants; 21 (xii) Incisional or excisional surgery of the extraocular 22 muscles; (xiii) Surgery of the eyelid for malignancies or for incisional 23 24 cosmetic or mechanical repair of blepharochalasis, ptosis, or 25 tarsorrhaphy; 26 (xiv) Surgery of the bony orbit, including orbital implants; 27 (xv) Incisional or excisional surgery of the lacrimal system other than lacrimal probing or related procedures; 28 29 (xvi) Surgery requiring full thickness conjunctivoplasty with 30 graft or flap; 31 (xvii) Any surgical procedure that does not provide for the 32 correction and relief of ocular abnormalities; (xviii) Incision into the eyeball; 33 34 (xix) Retrobulbar or intraorbital injection; or 35 (xx) Pterygium surgery.

authorized, licensed, or certified by the board. Any advanced procedure licensed optometrist authorized to practice under this

or perform laser or nonlaser surgical procedures until he or she is

(2) An optometrist shall not administer drugs, prescribe drugs,

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p. 3 SB 5542

chapter shall meet the educational and competence criteria set forth by the board in order to perform expanded therapeutic procedures.

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- (3) (a) Those persons using topical <u>and oral</u> drugs for diagnostic <u>and therapeutic</u> purposes in the practice of optometry shall have ((a <u>minimum of sixty hours of</u>)) didactic and clinical instruction in general and ocular pharmacology as applied to optometry, as established by the board, and certification from an institution of higher learning, accredited by those agencies recognized by the United States office of education or the council on postsecondary accreditation to qualify for certification by the optometry board of Washington to use drugs for diagnostic <u>and therapeutic</u> purposes.
- (b) Those persons ((using or prescribing topical drugs for therapeutic purposes)) administering injection and advanced procedures for treatment in the practice of optometry must be certified under (a) of this subsection, and must have ((an)) additional ((minimum of seventy-five hours of)) didactic and supervised clinical instruction, as established by the board, and certification from an institution of higher learning, accredited by those agencies recognized by the United States office of education or the council on postsecondary accreditation to qualify for certification by the optometry board ((of Washington to use drugs for therapeutic purposes)) to administer injections and advanced procedures.
- (c) ((Those persons using or prescribing drugs administered orally for diagnostic or therapeutic purposes in the practice of optometry shall be certified under (b) of this subsection, and shall have an additional minimum of sixteen hours of didactic and eight hours of supervised clinical instruction as established by the board, and certification from an institution of higher learning, )) The board shall designate what postgraduate courses may be accepted for certification to provide advanced ophthalmic surgical procedures. If a course is offered by an institution of higher education accredited by those agencies recognized by the United States office of education or the council on postsecondary accreditation to qualify for certification by the ((optometry board of Washington to administer, dispense, or prescribe oral drugs for diagnostic or therapeutic purposes)) board to perform advanced procedures, this course should contain continuing education including didactic and practical training or an equivalent course or exam may be ruled as acceptable.

p. 4 SB 5542

(d) ((Those persons administering epinephrine by injection for treatment of anaphylactic shock in the practice of optometry must be certified under (b) of this subsection and must have an additional minimum of four hours of didactic and supervised clinical instruction, as established by the board, and certification from an institution of higher learning, accredited by those agencies recognized by the United States office of education or the council on postsecondary accreditation to qualify for certification by the optometry board to administer epinephrine by injection.

- (e) Such course or courses shall be the fiscal responsibility of the participating and attending optometrist.
- (f) (i) All persons receiving their initial license under this chapter on or after January 1, 2007, must be certified under (a), (b), (c), and (d) of this subsection.
- (ii) All persons licensed under this chapter on or after January 1, 2009, must be certified under (a) and (b) of this subsection.
  - (iii) All persons licensed under this chapter on or after January 1, 2011, must be certified under (a), (b), (c), and (d) of this subsection.
  - (3)) Such course or courses shall be the fiscal responsibility of the participating and attending optometrist. The board shall determine a date in which all persons licensed under this chapter must be certified under (a) and (b) of this subsection.
  - (4) The board shall establish a list of topical drugs for diagnostic and treatment purposes limited to the practice of optometry, and no person licensed pursuant to this chapter shall prescribe, dispense, purchase, possess, or administer drugs except as authorized and to the extent permitted by the board.
  - ((4+)) (5) The board must establish a list of oral Schedule III through V controlled substances and any oral legend drugs, with the approval of and after consultation with the pharmacy quality assurance commission. The board may include Schedule II hydrocodone combination products consistent with subsection ((4+)) (7) of this section. No person licensed under this chapter may use, prescribe, dispense, purchase, possess, or administer these drugs except as authorized and to the extent permitted by the board. ((4+)) (1) (1) may use, prescribe, dispense, or administer oral corticosteroids.)
  - (a) The board, with the approval of and in consultation with the pharmacy quality assurance commission, must establish, by rule, specific guidelines for the prescription and administration of drugs

p. 5 SB 5542

by optometrists, so that licensed optometrists and persons filling their prescriptions have a clear understanding of which drugs and which dosages or forms are included in the authority granted by this section.

(b) An optometrist may not((÷

- (i) Prescribe)) prescribe, dispense, or administer a controlled substance for more than seven days in treating a particular patient for a single trauma, episode, or condition or for pain associated with or related to the trauma, episode, or condition((; or
- (ii) Prescribe an oral drug within ninety days following ophthalmic surgery unless the optometrist consults with the treating ophthalmologist)).
- (c) If treatment exceeding the limitation in (b)( $(\frac{1}{2})$ ) of this subsection is indicated, the patient must be referred to a physician licensed under chapter 18.71 RCW.
- (d) The prescription or administration of drugs as authorized in this section is specifically limited to those drugs appropriate to treatment of diseases or conditions of the human eye and the adnexa that are within the scope of practice of optometry. The prescription or administration of drugs for any other purpose is not authorized by this section.
- ((+5))) (6) The board shall develop a means of identification and verification of optometrists certified to use therapeutic drugs for the purpose of issuing prescriptions as authorized by this section.
- $((\frac{(6)}{(1)}))$  Nothing in this chapter may be construed to authorize the use, prescription, dispensing, purchase, possession, or administration of any Schedule I or II controlled substance, except Schedule II hydrocodone combination products. The provisions of this subsection must be strictly construed.
- (((7) With the exception of the administration of epinephrine by injection for the treatment of anaphylactic shock, no injections or infusions may be administered by an optometrist.
- (8) Nothing in this chapter may be construed to authorize optometrists to perform ophthalmic surgery. Ophthalmic surgery is defined as any invasive procedure in which human tissue is cut, ablated, or otherwise penetrated by incision, injection, laser, ultrasound, or other means, in order to: Treat human eye diseases; alter or correct refractive error; or alter or enhance cosmetic appearance. Nothing in this chapter limits an optometrist's ability to use diagnostic instruments utilizing laser or ultrasound

p. 6 SB 5542

technology. Ophthalmic surgery, as defined in this subsection, does not include removal of superficial ocular foreign bodies, epilation of misaligned eyelashes, placement of punctal or lacrimal plugs, diagnostic dilation and irrigation of the lacrimal system, orthokeratology, prescription and fitting of contact lenses with the purpose of altering refractive error, or other similar procedures within the scope of practice of optometry.)) (8) In addition to therapeutic intralesional and subconjunctival injections to the ocular tissues and adnexa, epinephrine may be administered by injection for the treatment of anaphylactic shock.

- (9) In a public health emergency, the state health officer may authorize therapeutically licensed optometrists to administer inoculations for systemic health reasons.
- (10) (a) Any optometrist authorized by the board shall be permitted to purchase diagnostic pharmaceutical agents for use in the practice of optometry. Any optometrist authorized by the board shall be permitted to prescribe therapeutic pharmaceutical agents in the practice of optometry. Optometrists authorized by the board to purchase pharmaceutical agents shall obtain them from licensed wholesalers or pharmacists, using prescriptions or chart orders placed in the same or similar manner as any physician or other practitioner so authorized. Purchases shall be limited to those pharmaceutical agents specified in this section, based upon the authority conferred upon the optometrist by the board consistent with the educational qualifications of the optometrist as established in this section.
  - (b) Diagnostic and therapeutic pharmaceutical agents are any prescription or nonprescription drug delivered via any route of administration used or prescribed for the diagnosis, treatment, or mitigation of abnormal conditions and pathology of the human eye and its adnexa. Diagnostic and therapeutic pharmaceutical agents do not include Schedule I and Schedule II drugs, except for hydrocodone combination products.
- **Sec. 2.** RCW 18.54.030 and 2011 c 336 s 489 are each amended to 35 read as follows:
  - ((The initial composition of the optometry board includes the three members of the examining committee for optometry plus two more optometrists to be appointed by the governor.

p. 7 SB 5542

The governor must make all appointments to the optometry board. Only optometrists who are citizens of the United States, residents of this state, having been licensed to practice and practicing optometry in this state for a period of at least four years immediately preceding the effective date of appointment, and who have no connection with any school or college embracing the teaching of optometry or with any optical supply business may be appointed.

The governor may set the terms of office of the initial board at his or her discretion, to establish the following perpetual succession: The terms of the initial board include one position for one year, two for two years, and two for three years; and upon the expiration of the terms of the initial board, all appointments are for three years.

In addition to the members specified in this section, the governor shall appoint a consumer member of the board, who shall serve for a term of three years.))

The board of optometry shall consist of six members appointed by the governor. Five members shall be Washington licensed practicing optometrists whose licenses are in good standing. One member shall be a consumer member who is not associated with or financially interested in the practice or business regulated.

Each optometrist member shall be a Washington licensed practicing optometrist in good standing for not less than five years immediately preceding his or her appointment to the board. The member shall not be in any way connected with or interested in any optometric supply business.

The members shall serve for a term of three years with the option of reappointment for subsequent three year terms at the governor's discretion.

In the event that a vacancy occurs on the board in the middle of an appointee's term, the governor must appoint a successor for the unexpired portion of the term only.

- **Sec. 3.** RCW 18.54.060 and 1963 c 25 s 6 are each amended to read as follows:
- ((Three)) <u>A majority of</u> members constitute a quorum for the transaction of business of the board.
- **Sec. 4.** RCW 18.54.050 and 2011 c 336 s 491 are each amended to 38 read as follows:

p. 8 SB 5542

The board must meet at least once yearly or more frequently upon call of the ((chair)) board's officers or the secretary of health at such times and places as the ((chair)) board's officers or the secretary of health may designate by giving three days' notice or as otherwise required by RCW 42.30.075. A full record of the board's proceedings shall be kept in the office of the board and shall be open to inspection at all reasonable times.

8 **Sec. 5.** RCW 18.54.070 and 1995 c 198 s 7 are each amended to 9 read as follows:

The board has the following powers and duties:

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- (1) To develop and administer, or approve, or both, a licensure examination. The board may approve an examination prepared or administered by a private testing agency or association of licensing authorities.
- (2) The board shall adopt rules and regulations to promote safety, protection and the welfare of the public, to carry out the purposes of this chapter, to aid the board in the performance of its powers and duties, and to govern the practice of optometry. The administrative regulations shall include the classification and licensure of optometrists by examination or credentials, retirement of a license, and reinstatement of a license.
- 22 (3) The board shall have the sole authority to determine what 23 constitutes the practice of optometry within the confines of this 24 chapter and chapter 18.53 RCW.
- 25 (4) The board shall keep a register containing the name, address, 26 license number, email, and phone number of every person licensed to 27 practice optometry in this state to the best of their ability.

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p. 9 SB 5542