HOUSE BILL REPORT ESHB 1164

As Passed House:

March 14, 2003

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: Concerning optometric care and practice.

Sponsors: By House Committee on Health Care (originally sponsored by Representatives Kessler, Pflug, Ruderman, Alexander, Cody, Moeller, Campbell, Clibborn, Morrell, Armstrong, Clements, Delvin, McDonald, Berkey, Haigh, Kenney, Hankins, Conway, Rockefeller, Simpson, Chase and McMahan).

Brief History:

Committee Activity: Health Care: 1/28/03, 2/6/03 [DPS]. Floor Activity: Passed House: 3/14/03, 97-0.

Brief Summary of Engrossed Substitute Bill

- Allows optometrists to prescribe and administer diagnostic or therapeutic oral medications and injectable epinephrine upon completion of additional training.
- Requires the Optometry Board and the Board of Pharmacy to create a list of drugs that optometrists may prescribe and rules to specify authorized dosages and forms.
- Prohibits optometrists from performing ophthalmic surgery and prescribing Schedule I or II drugs.

HOUSE COMMITTEE ON HEALTH CARE

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 10 members: Representatives Cody, Chair; Morrell, Vice Chair; Pflug, Ranking Minority Member; Bailey, Assistant Ranking Minority Member; Alexander, Benson, Campbell, Clibborn, Edwards and Moeller.

Minority Report: Do not pass. Signed by 3 members: Representatives Darneille, Schual-Berke and Skinner.

Staff: Chris Blake (786-7392).

Background:

Optometry

The practice of optometry involves the examination of the human eye, the examination and ascertaining of any defects of the human vision system, and the analysis of the process of vision. Optometrists may test patients' visual acuity, depth and color perception, and the ability to focus and coordinate the eyes; prescribe eyeglasses and contact lenses; prescribe visual therapy; and adapt prosthetic eyes.

Upon meeting additional requirements, optometrists may also prescribe topically applied drugs for diagnostic or therapeutic purposes. They may apply topical drugs for diagnostic purposes upon (1) completing 60 hours of didactic and clinical instruction in general and ocular pharmacology; and (2) receiving certification from an accredited institute of higher education. Optometrists may prescribe topical drugs for therapeutic purposes upon (1) completing the requirements for diagnostic drugs; (2) completing an additional 75 hours of didactic and clinical instruction in ocular pharmacology, anti-infective drugs, and anti-inflammatory drugs; and (3) receiving certification from an accredited institute of higher education.

Optometrists are regulated by the Optometry Board (Board) under the Uniform Disciplinary Act. The Board is responsible for the issuance and denial of provider licenses, the investigation of acts of unprofessional conduct, and the discipline of licensees. The Board has also adopted a drug formulary of topically applied diagnostic and therapeutic drugs that optometrists may use upon meeting the additional training requirements.

Controlled Substances

Controlled substances are categorized into five types according to their potential for abuse, the extent of currently accepted medical use in the United States, and the potential that use of the drug may lead to physical or psychological dependence. Schedule I drugs are those drugs with a high potential for abuse, no currently accepted medical use in treatment, and a lack of accepted safety for use in treatment under medical supervision. At the other end of the spectrum are Schedule V drugs which are those drugs with a low potential for abuse relative to the other categories, a currently accepted medical use in treatment, and a likelihood that abuse may lead to only limited physical or psychological dependence relative to the other categories.

Summary of Engrossed Substitute Bill:

The range of drugs that an optometrist may use or prescribe is expanded beyond certain topically-applied drugs to include some oral drugs for diagnostic and therapeutic purposes and injectable epinephrine for the treatment of anaphylactic shock. Optometrists may only prescribe or administer drugs that treat diseases or conditions of the eye and adnexa that are within an optometrist's scope of practice.

To use or prescribe diagnostic or therapeutic oral medications, an optometrist must: (1) meet the existing supplemental requirements for topically-applied drugs; (2) complete an additional 16 hours of didactic instruction and eight hours of supervised clinical instruction; and (3) receive certification from an accredited institute of higher education.

To use injectable epinephrine, an optometrist must: (1) meet the existing supplemental requirements for topically-applied drugs; (2) complete an additional four hours of didactic and supervised clinical instruction; and (3) receive certification from an accredited institute of higher education.

The Optometry Board and the Board of Pharmacy must create a list of Schedule III, IV, and V controlled substances and oral legend drugs that optometrists may prescribe. The two boards must also develop rules to specify the proper dosages and forms of the drugs that optometrists may prescribe or administer. Optometrists may not prescribe, dispense, administer or use oral corticosteroids. Optometrists may not administer injections or infusions other than epinephrine.

Optometrists may not prescribe a controlled substance for more than seven days to any patient for treating a single episode or condition or for pain. They also may not prescribe or administer an oral drug to a patient within 90 days of ophthalmic surgery without consulting the treating ophthalmologist.

Optometrists may not perform ophthalmic surgery which is defined to include invasive procedures where human tissue is cut by incision, injection, laser, or ultrasound. Optometrists may use diagnostic instruments that use laser or ultrasound technology. They may also remove superficial objects from the eye, place punctal or lacrimal plugs, dilate and irrigate the lacrimal system for diagnostic purposes, and perform certain other listed procedures. Optometrists may not prescribe any Schedule I or II substance.

Technical corrections are made to other statutory sections to reflect these changes.

Appropriation: None.

Fiscal Note: Available.

House Bill Report

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

Testimony For: Allowing optometrists to prescribe oral medications is cost-effective and reduces delays in patient care. National education standards for optometrists prepare them to prescribe and administer oral medications.

Testimony Against: There is a large difference between optometrists and ophthalmologists in their abilities to recognize and treat disease. The treatment of serious eye disease belongs with ophthalmologists because of their additional training. There should be a strict prohibition on optometric surgery.

Testified: (In support) Representative Kessler, prime sponsor; Dr. Les Walls and Brad Tower, Optometric Physicians of Washington; Dr. Lori Youngman, Pacific Cataract & Laser Institute; and Dr. Leland Carr, Pacific University.

(Opposed) Susie Tracy, Aaron Weingeist, and Bob Nash, Washington Association of Eye Physicians and Surgeons.