

February 11, 2021

House Health Care Committee Oregon House of Representatives 900 Court Street NE, H-489 Salem, Oregon 97301

To: The House Healthcare Committee, regarding HB 2541

Dear Chair Prusak and members of the House Healthcare Committee,

I am writing in support of HB 2541, allowing optometric physicians to practice to the highest level of training and education. Updating certain statutory provisions, while removing other unnecessary barriers in state law for Doctors of Optometry, is critical in keeping up with the rigorous education and clinical training that primary eye and vision care providers receive today. Ultimately, these updates will provide greater access in the healthcare marketplace for patients to better receive the timely, qualified and often critical care they need.

I am a proud graduate of Pacific University College of Optometry (PUCO) in Forest Grove, Oregon, class of 2003. I served on active duty in the United States Air Force as an optometrist; practiced alongside ophthalmologists at Casey Eye Institute and in private practice; owned and practiced at a Medicaid only clinic in the State of Washington; owned and operated a private practice for the last seven years in Hood River, Oregon; and developed an underserved clinic within a Federally Qualified Health Center through grants and cooperative efforts with OHSU, early head start and the American Academy of Optometry. It is recognized within the eye care community that we have primary eye care access problems and underserved communities throughout the State of Oregon.

In Hood River, the relationship between ophthalmology and optometry is strong. The testimony I've heard from ophthalmology is concerning. In my community, I feel respected by my ophthalmic colleagues when they send urgent patients my way and when I refer them complex cases. When I refer a patient to ophthalmology, the wait time is often longer than three months, requiring three additional visits, for a procedure that can be performed in less than five minutes using equipment we use every day. These procedures most often also result in improved quality of life for our aging population. Allowing laser procedures is truly increasing access to primary eye care. This is NOT about asking for complex surgical privileges involving scalpels and anesthesia. We truly are requesting the ability to perform procedures we were trained to perform; specific to my education, 18 years ago.

Currently, five states - Alaska, Arkansas, Louisiana, Kentucky, and Oklahoma, permit ophthalmic surgical procedures, YAG laser capsulotomy and trabeculoplasty, under their scope of practice acts. Taking this into account and stretching as far back as 1998 in the case of Oklahoma, there have been no malpractice judgements against optometrists related to these procedures or those proposed in <u>HB2541</u>.

Doctors of optometry are on the front lines of eye health and vision care. In addition to providing comprehensive vision care, we also manage the entire spectrum of ocular diseases. As a legislated profession, our ability to manage these conditions appropriately requires occasional modifications to the scope of practice defined in Oregon Revised Statutes. Technology and optometric training have changed to the point that it is now time to update Oregon statutes to reflect these changes.

I sincerely thank you for your time and consideration. I support Doctors of Optometry practicing to their full educational authority. Help us keep the underserved population receiving access to quality and timely care.

Sincerely,

Rebecca R. Chown, OD, FAAO Indian Creek Family Eye Care