

Ohio Legislative Service Commission

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S.B. 129 135th General Assembly

Bill Analysis

Version: As Introduced

Primary Sponsor: Sen. Cirino

Elizabeth Molnar, Attorney

SUMMARY

- Authorizes an optometrist who meets the bill's eligibility requirements to perform specified invasive procedures, including certain laser surgeries.
- Eliminates the current law limits on the types of therapeutic pharmaceutical agents that may be used in the practice of optometry, thereby broadening the drugs that an optometrist may prescribe or administer.
- Repeals the law prohibiting an optometrist from personally furnishing therapeutic pharmaceutical agents and grants the optometrist specific authority to do so.
- Revises the law governing optometrist authority to prescribe a drug delivery device, including by eliminating the existing law limitation that such a device have vision correction as its primary purpose.
- Makes technical corrections to optometrist licensure provisions amended by H.B. 509 of the 134th General Assembly, an act revising occupational regulations.

DETAILED ANALYSIS

Optometrist authority to perform invasive procedures

The bill revises the law that generally prohibits an optometrist from performing invasive procedures, by specifically authorizing an optometrist who meets the bill's eligibility requirements to perform the following:¹

 Any injection, other than an intravenous or intraocular injection, of a drug, including a prescription drug;

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¹ R.C. 4725.01(A)(2) and 4725.012.

- The incision and curettage, or surgical scraping, of a chalazion, a small eyelid tumor;
- The removal and biopsy of a skin lesion if the lesion has a low risk of malignancy and does not involve the eyelid margin;
- The excision or drainage, or both, of a cyst or concretion (lesion) on the conjunctiva, the thin, clear membrane that protects the white of the eye;
- Any suturing other than suturing of the cornea (the clear outer layer at the front of the eye) or sclera (the white outer layer of the eye);
- A laser surgery consisting of capsulotomy, a procedure to clear cloudy vision after cataract surgery, trabeculoplasty, a type of glaucoma surgery that creates a new pathway for fluid inside the eye to be drained, or peripheral iridotomy, a treatment for angle-closure glaucoma that involves creating a hole in the iris.²

Training requirements

To be eligible to perform such a procedure, an optometrist must demonstrate to the State Vision Professionals Board that the optometrist satisfies the training requirements for that procedure established by the Board in rule.

With respect to a laser surgery consisting of capsulotomy, trabeculoplasty, or peripheral iridotomy, an optometrist may demonstrate satisfaction of training requirements by providing to the Board evidence of successfully completing such training while enrolled in a Board-approved school of optometry.³ The bill also specifies that, for such a surgery, the training must consist of at least 32 hours of instruction.⁴

Rulemaking

The State Vision Professionals Board is to adopt rules, as necessary, governing the performance of procedures authorized by the bill. The rules must be adopted in accordance with Ohio's Administrative Procedure Act and specify the following:

- The infection control practices to be followed by an optometrist when performing each of the procedures;
- The training requirements to be satisfied in order to be eligible to perform each procedure.⁵

Other than training for a laser surgery permitted under the bill, which must consist of at least 32 hours of instruction, the Board must determine in rule the minimum number of hours of instruction for each procedure.

³ R.C. 4725.012(C).

⁴ R.C. 4725.012(B).

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² R.C. 4725.012(A).

 $^{^{5}}$ R.C. 4725.012(B) and R.C. Chapter 119, not in the bill.

Invasive procedure definition

Current law maintained by the bill defines an invasive procedure as one that involves cutting or otherwise infiltrating human tissue by mechanical means, including surgery, laser surgery, ionizing radiation, therapeutic ultrasound, administering medication by injection, or the removal of intraocular foreign bodies.⁶

Note on epinephrine administration

The bill maintains the existing authority of an optometrist to administer epinephrine by injection to individuals in emergency situations to counteract anaphylaxis or anaphylactic shock. It clarifies that the bill's training requirements for performing certain invasive procedures do not extend to injections of epinephrine.⁷

Optometrist authority to prescribe and administer pharmaceutical agents and devices

The bill revises in the following ways the law governing the authority of an optometrist to prescribe and administer pharmaceutical agents and devices. 8 Some of the revisions serve as corresponding changes to provisions enacted at the close of the 134th General Assembly as part of H.B. 509.

Prohibition on furnishing pharmaceutical agents

The bill eliminates the general prohibition on an optometrist personally furnishing a therapeutic pharmaceutical agent to any person. It then specifically authorizes such an activity and further describes the activity as providing a complete or partial supply. 10 As a result, the existing limit of providing only a 72-hour supply, and without charge, no longer applies under the bill.

Types of pharmaceutical agents

The bill removes the current law limits on the types of therapeutic pharmaceutical agents that may be used in the practice of optometry, thereby broadening the drugs that an optometrist may prescribe or administer. 11 At present, an optometrist may use only those specified by the Board in rule or classified in one of the following categories: anti-infectives, such antibiotics, antivirals, antimicrobials, and antifungals; anti-allergy agents; antiglaucoma agents; certain prescription and nonprescription analgesics; and anti-inflammatories, excluding oral steroids other than methylpredisolone, which may be used if prescribed under certain conditions.

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⁶ R.C. 4725.01(E).

⁷ R.C. 4725.01(A) and 4725.012(A)(1).

⁸ R.C. 4725.01, 4725.011, and 4725.131.

⁹ R.C. 4725.02.

¹⁰ R.C. 4725.01(A)(3).

¹¹ R.C. 4725.01(B).

As part of the foregoing change, the bill eliminates the requirement that the Board adopt rules specifying the drugs that an optometrist may prescribe and administer.¹²

Note on controlled substances

The bill maintains an existing law provision specifying that a therapeutic pharmaceutical agent does not include a controlled substance, except for an analgesic controlled substance authorized by the Vision Professionals Board in rule.¹³

Drug delivery devices

Current law authorizes an optometrist to prescribe and dispense any device that has vision correction as its primary purpose but also combines with that purpose the delivery of a drug, if the drug would otherwise be a topical or oral pharmaceutical agent.¹⁴ The bill eliminates the condition that the device have vision correction as its primary purpose. It also specifies the types of devices that an optometrist may prescribe and dispense. These include, but are not limited to, contact lenses, punctal plugs, and medical devices that the Board has determined are appropriate for use in the practice of optometry.

Conditions of the visual system

Regarding the conditions of the visual system that may be treated by an optometrist, the bill specifies that any condition of the visual system may be involved, rather than only a condition that is abnormal.¹⁵ Further, the visual system is designated by the bill as including the human eye's associated structures, rather than only the eye and its accessory or subordinate parts.¹⁶

Additional consolidation of optometry licensure process

H.B. 509 of the 134th General Assembly eliminated the following issued by the Vision Professionals Board: the topical ocular pharmaceutical agents certificate and therapeutic pharmaceutical agents certificate. If held by an optometrist, a topical ocular pharmaceutical agents certificate authorized the optometrist to administer to patients topical drugs for evaluative purposes.¹⁷ A therapeutic pharmaceutical agents certificate allowed its holder to administer and prescribe drugs, including topicals, and certain devices. Following H.B. 509's enactment, a licensed optometrist may prescribe and administer such drugs and devices without having to hold either certificate.

Under S.B. 129, an optometrist's certificate of licensure remains the document that identifies the optometrist's authority to practice in Ohio.

¹³ See R.C. 4725.091, not in the bill.

¹² R.C. 4725.09(B).

¹⁴ R.C. 4725.011.

¹⁵ R.C. 4725.01(A)(2) and (B)

¹⁶ R.C. 4726.01(F).

¹⁷ R.C. 4725.01(A).

Certificate conversion; scope of practice unchanged

S.B. 129 also repeals codified provisions of H.B. 509 that authorize an individual who, before April 6, 2023, held a certificate of licensure or topical ocular pharmaceutical agents certificate to do the following: (1) continue to practice optometry within that prior certificate's scope and (2) complete additional education in order to engage in the practice of optometry.¹⁸

S.B. 129 replaces the foregoing provisions with uncodified provisions allowing the Vision Professionals Board to take any action it considers necessary to convert each valid certificate of licensure, topical ocular pharmaceutical agents certificate, and therapeutic pharmaceutical agents certificate issued to an optometrist before April 6, 2023, into a certificate to practice optometry. S.B. 129 further specifies that such a conversion does not expand or alter the optometrist's prior scope of practice.

Corresponding and technical changes

S.B 129 makes several additional revisions to the law governing the practice of optometry that follow from the changes enacted under H.B. 509. For instance, it eliminates the definition of a topical ocular pharmaceutical agent and references to such an agent.²⁰ Note also that under S.B. 129, a therapeutic pharmaceutical agent includes any drug used for evaluative purposes.

A number of other changes are made by S.B. 129 throughout the optometry law to account for statutory cross-reference corrections and to consistently identify Ohio's license to practice optometry as a certificate of licensure.

HISTORY

Action	Date
Introduced	06-27-23

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¹⁸ R.C. 4725.131.

¹⁹ Section 6.

²⁰ R.C. 4725.01(B) and 4725.31.