

Date of Hearing: April 19, 2022

ASSEMBLY COMMITTEE ON BUSINESS AND PROFESSIONS

Marc Berman, Chair

AB 2236 (Low) – As Amended March 17, 2022

SUBJECT: Optometry.

SUMMARY: Updates training requirements for optometric assistants, requires optometrists to stabilize and refer patients with certain conditions to an ophthalmologist, and makes other technical changes to the Optometry Act.

EXISTING LAW:

- 1) Establishes the California State Board of Optometry (CBO) for the licensure and regulation of optometrists, registered dispensing opticians, contact lens dispensers, spectacle lens dispensers, and nonresident contact lens dispensers. (Business and Professions Code (BPC) §§ 3000 *et seq.*)
- 2) Establishes the Medical Board of California for the licensure and regulation of physicians and surgeons, including ophthalmologists specializing in the diagnosis and treatment of eye disorders. (BPC §§ 2000 *et seq.*)
- 3) Makes it unlawful for a person to engage in or advertise the practice of optometry without having first obtained an optometrist license from the CBO. (BPC § 3040)
- 4) Provides that the practice of optometry includes the prevention, diagnosis, treatment, and management of disorders and dysfunctions of the visual system, as well as the provision of habilitative or rehabilitative optometric services, and specifically authorizes an optometrist who is certified to use therapeutic pharmaceutical agents to diagnose and treat the human eye for various enumerated conditions. (BPC § 3041)
- 5) Requires an optometrist seeking certification to use therapeutic pharmaceutical agents and diagnose and treat specified conditions to apply for a certificate from the CBO and meet additional education and training requirements. (BPC § 3041.3)
- 6) Authorizes an assistant in any setting where optometry or ophthalmology is practiced who is acting under the direct responsibility and supervision of a physician and surgeon or optometrist to fit prescription lenses and perform specified services, including performing preliminary subjective refraction procedures in connection with finalizing procedures performed by an ophthalmologist or optometrist, subject to certain conditions, including at least 45 hours of documented training in subjective refraction procedures. (BPC § 2544)

THIS BILL:

- 1) Provides that the 45 hours of training currently required for optometric assistants who perform preliminary subjective refraction procedures must include the performance of those procedures.
- 2) Requires an optometrist diagnosing or suspecting angle closure glaucoma to attempt medical stabilization, if possible, and immediately refer the patient to an ophthalmologist.

FISCAL EFFECT: Unknown; this bill is keyed fiscal by the Legislative Counsel.

COMMENTS:

Purpose. This bill is sponsored by the **California Optometric Association**.

Background.

Optometry Scope Expansion. In the wake of what many regard to be a physician shortage in California, efforts have been made to expand the scope of practice for optometrists to provide services traditionally reserved for physicians and surgeons specializing in ophthalmology. For example, legislation enacted in recent years have allowed optometrists to treat glaucoma, use therapeutic pharmaceutical agents, employ the use of new drugs and technologies to treat certain conditions, and treat patients with topical and oral therapeutic pharmaceutical agents. These efforts have drawn on the extensive training optometrists receive to empower them to provide additional services and alleviate the need for patients to obtain care from an ophthalmologist.

Acute Closed Angle Glaucoma. Acute angle-closure glaucoma is an ocular emergency that results from a rapid increase in pressure due to a blockage or obstruction of the outflow of aqueous humor (clear fluid in the space towards the front of the eye). The rapid increase in pressure (glaucoma) can damage the optic nerve and eventually lead to blindness. Initial treatment for acute angle-closure glaucoma can include the application of medications or other procedures to reduce intraocular pressure, but ultimately it may require the use of lasers or surgery. This bill would reinsert the authority for optometrists to stabilize the condition and reinsert the requirement that the optometrist immediately refers the patient to an ophthalmologist.

Training for Optometric Assistants. Another recently enacted change to the law expanded the types of procedures that may be performed by optometric assistants, who are unlicensed individuals working under the supervision of an optometrist or an ophthalmologist. Last year, legislation allowed for these assistants to perform preliminary subjective refraction procedures in connection with finalizing subjective refraction procedures performed by an ophthalmologist or optometrist, subject to certain conditions. One of those conditions is a requirement that the assistant have at least 45 hours of documented training in subjective refraction procedures acceptable to the supervising ophthalmologist or optometrist. This bill would specify that this training must include the performance of those procedures.

Current Related Legislation. AB 2574 (Salas) contains provisions similar to those in this bill and additionally corrects an erroneous cross-reference. *This bill is pending in the Assembly Committee on Appropriations.*

Prior Related Legislation. AB 407 (Salas, Chapter 652, Statutes of 2021) expanded and revised the scope of practice for qualified optometrists and optometric assistants to diagnose and treat specified disorders and dysfunctions of the visual system and authorized optometric assistants to perform preliminary subjective refraction procedures under specified conditions.

AB 1467 (Salas and Low) of 2019 would have authorized an optometrist to provide services outlined in a delegation of services agreement between the optometrist and an ophthalmologist. *This bill died in the Senate Committee on Business, Professions, and Economic Development.*

AB 443 (Salas, Chapter 549, Statutes of 2017) expanded the scope of practice for optometrists to include additional procedures including the administration of specific immunizations for optometrists who meet certain training requirements.

SB 1406 (Correa, Chapter 352, Statutes of 2008) expanded the scope of practice for optometrists, including establishing requirements for glaucoma certification and the requirement related to an acute closed-angle attack.

REGISTERED SUPPORT:

None on file.

REGISTERED OPPOSITION:

None on file.

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