
SENATE COMMITTEE ON APPROPRIATIONS

Senator Anthony Portantino, Chair
2021 - 2022 Regular Session

AB 2236 (Low) - Optometry: certification: use of anterior segment lasers and performing minor procedures

Version: June 29, 2022

Urgency: No

Hearing Date: August 11, 2022

Policy Vote: B., P. & E.D. 9 - 1

Mandate: No

Consultant: Janelle Miyashiro

Bill Summary: AB 2236 authorizes an optometrist certified to treat glaucoma to use an anterior segment laser and perform minor procedures, as defined, if the optometrist meets additional certification requirements, as specified; authorizes the Board of Optometry to adopt rules and regulations as necessary and charge a fee to issue a certificate to an optometrist authorized to perform those procedures.

******* ANALYSIS ADDENDUM – SUSPENSE FILE *******

**The following information is revised to reflect amendments
adopted by the committee on August 11, 2022**

Fiscal Impact: Unknown fiscal impact, likely ranging in the high-hundreds of thousands to low-millions of dollars, to the Board of Optometry (Optometry Fund), which would include, among other things:

- One-time costs to promulgate regulations, establish the certification fee, and develop the various required forms to be used by licensees performing procedures under the new certification, qualified educators, and course administrators.
- One-time costs for information technology changes to create a portal to allow optometrists to submit to the Board the required reports on procedures performed pursuant to the new certification and any subsequent adverse outcomes.
- One-time and ongoing costs to approve required educational and training courses. Given the specificity of the procedures required under the new certification, the Board will likely need additional specialized staff on at least a temporary basis with subject matter expertise to create guidelines and procedures for nontechnical staff.
- Ongoing costs to implement the new certification, track reports of all minor procedures performed or any subsequent adverse outcomes, and perform other enforcement activities related to the new certification.
- Ongoing costs for workload associated with auditing the attestations to ensure compliance with proscribed training requirements.

There will be an unknown, ongoing increase in revenue, likely in the high-hundreds of thousands of dollars, which may offset the Board's administrative and enforcement costs to some extent. Any actual increase in fee revenue will depend on the fee amount determined during the initial workload analysis during the first year of implementation of the certification.

Actual ongoing administrative costs to the Board are unknown and would depend on, among other things, the number of glaucoma certified optometrists who would also apply for and maintain the anterior segment certification. For context, the Board currently has 4,750 glaucoma certified optometrists, with 10 to 12 percent of those

licensees expected to apply for the new certification. The Board notes that since the educational criteria to become certified is now considered basic curriculum for newly graduating optometrists, it is expected that there will be a higher volume of graduating students applying for both certification in glaucoma and anterior segment upon graduation which could increase this assumption in future years.

Additionally, the Board would likely need a delayed implementation date to fully stand-up the new certification. Absent delayed implementation, there will be additional cost and workload pressures to meet the requirements of the bill.

Author Amendments:

- Add neuromuscular blockers to the list of classes of agents excluded from the practice of optometry.
- Provide a list of advanced procedures an optometrist shall be certified to perform if they meet specified requirements.
- In order to perform the specified advanced procedures, require an optometrist to satisfy the following requirements:
 - Within two years prior to beginning other requirements, complete a 32 hour minimum board-approved course on medical decision making, an overview and case presentations of known complications, and practical experience performing the procedures.
 - Pass both sections of the Laser and Surgical Procedures Examination of the National Board of Examiners in Optometry or its equivalent as determined by the Board.
 - Authorizes this requirement to be waived if an optometrist has successfully passed both sections of the examination previously.
 - Within three years, complete a board-approved training program that includes all required procedures involving sufficient direct experience with live human patients, as specified below:
 - Hands-on instruction on simulated eyes before performing the related procedure on live human patients, as specified.
 - At least 43 complete surgical procedures on live human patients, as specified.
 - Provides that if necessary to certify optometrist competence, the program shall require sufficient additional experience.
 - Requires the training to include at least a certain percentage of the required procedures specified above to be performed in a cohort model, as specified. Authorizes procedures not completed in a cohort model to be completed under a preceptorship model, as specified.
- Establish criteria for when an optometrist is required to make a timely referral of a patient and all related medical records to an ophthalmologist or a qualified center to provide urgent or emergent care.
- Specify optometrists may not perform blepharoplasty or any cosmetic surgery including injections unless the procedure involves the removal of skin tags that meet other qualifying criteria.
- Require an optometrist to monitor and report the following information to the Board on a form provided by the Board or using an internet-based portal:

- At the time of license renewal or upon request by the Board, the number and types of procedures performed and the diagnosis of the patient at that time.
 - Within three weeks of the event, any adverse treatment outcomes that required a referral to or consultation with another health care provider.
- Establish requirements for optometrists to attest to their compliance with the above training requirements and provide for restrictions on an optometrist's advanced procedure certification, as specified.
- Require the Board to review adverse treatment outcome reports and compile and post a summary of this data on its website.
- Establish definitions.

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