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TO: Senate Public Health and Welfare Committee  
FROM: Todd Fleischer, CAE  
Executive Director  
RE: Senate Bill 490

I am Todd Fleischer. I am the executive director for the Kansas Optometric Association, which represents Kansas optometrists. Thank you for the opportunity to submit testimony in support of Senate Bill 490, which seeks to modernize the optometric scope of practice to reflect education and training of optometrists.

Doctors of optometry are independent primary health care providers who examine, diagnose, treat and manage diseases and disorders of the visual system, the eye and associated structures as well as diagnose related systemic conditions. They examine the internal and external structure of the eyes to diagnose eye diseases like glaucoma, cataracts and retinal disorders; systemic diseases like hypertension and diabetes; and vision conditions like nearsightedness, farsightedness, astigmatism and presbyopia. Optometrists also test to determine the patient's ability to focus and coordinate the eyes, and to judge depth and see colors accurately. They prescribe eyeglasses and contact lenses, low vision aids, vision therapy and medicines to treat vision conditions and eye disease.

As primary eye care providers in all corners of the state, optometrists are an integral part of the health care team and an entry point into the health care system. They are skilled in the co-management of surgical eye care, such as cataract, glaucoma or retinal procedures, which affect the eye health and vision of their patients and they are an excellent source of referrals to other health care professionals.

Optometrists have been licensed to provide care for patients in Kansas for more than 100 years. As advancements in treatment options, training and education have occurred, optometrists have gradually increased the level of care they can provide for their patients. However, there has been no significant changes to the optometric practice act for more than 20 years.

Because optometry is a legislated profession and scope of practice is determined by each state legislature, the optometric practice act can vary from state to state. The current scope of practice in Kansas is more restrictive than many states, including our neighboring states of Oklahoma, Colorado, Wyoming and Arkansas.



Each time the profession (or another other health care provider group who are not physicians) comes to the legislature seeking an update to the practice act, the opposition sites safety concerns and lack of training and education.

When meeting with opponents to this legislation over the last several years to discuss scope modernization, it was clear that they didn't understand existing optometric scope of practice. For example, during one meeting, an ophthalmologist suggested that he didn't believe an optometrist could safely remove a foreign body from the eye. He didn't realize that optometrists in Kansas have been safely and legally providing this service for Kansas patients for decades. While I thought this might have been an isolated incident, I was surprised when a similar sentiment was shared by an ophthalmologist during a hearing on a similar bill in front of the Missouri legislature just last week. Late last year, during a meeting with opponents to the bill, it was brought up that optometrists shouldn't be utilizing oral medications as part of their practice – again something that has been part of the practice act since the late 1990s.

To clear up some of these misunderstandings and to help address concerns from the opponents, SB 490 includes language specifically addressing the additional procedures added as well as exclusionary language to make it very clear what optometrists are *not* seeking to do. We have heard discussion that optometrists are wanting to do cataract surgery, retinal surgery, LASIK or use injections directly into the eye. That is simply not the case. These procedures, and many more, are specifically prohibited by the language in SB 490. In addition, while there are new procedures and treatment methods coming in the future, this bill is limited to procedures that are currently part of the educational curriculum of all optometric schools across the country, not future procedures that are not yet widely taught.

While we recognize that scope modernization legislation is not a favorite topic for discussion in the statehouse, we believe that scope modernization for optometrists in Kansas is long overdue. It is an unnecessary barrier for a provider to not be able to practice to the level of his or her training and quite frankly is a disservice to Kansas patients to not allow them to receive safe, appropriate care from the provider of their choice who is educated, trained and certified to deliver that care. It is also increasingly putting Kansas at a disadvantage when optometric students are determining where to practice upon attaining their Doctor of Optometry degree.

We ask for your support to pass Senate Bill 490 out favorably in its current form.

Thank you for your consideration.

