GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2017

S SENATE BILL 342

Short Title:	Enact Enhanced Access to Eye Care Act.	(Public)
Sponsors:	Senators Hise, Tucker, Brock (Primary Sponsors); Jackson, Newton, Rabin, and Smith-Ingram.	Britt, Curtis, Ford, Horner, B.
Referred to:	Rules and Operations of the Senate	

March 22, 2017

A BILL TO BE ENTITLED

AN ACT AMENDING THE SCOPE OF PRACTICE OF OPTOMETRY IN ORDER TO ENHANCE ACCESS TO EYE CARE IN NORTH CAROLINA.

Whereas, the provision of eye care is rapidly evolving through advances in technology, pharmacology, and biotechnology; and

Whereas, the health care profession of optometry is dedicated to providing patient-centered eye care of the highest quality; and

Whereas, 1180 licensed Doctors of Optometry now provide the majority of primary eye care in North Carolina due to widespread geographic distribution and excellence in practice; and

Whereas, Doctors of Optometry provide eye care in 98 North Carolina counties, with primary office locations in 88 counties; and

Whereas, the wide availability of practicing Doctors of Optometry in North Carolina provides access to high quality eye care throughout the State; and

Whereas, the optometric profession has steadily evolved in expansion of practice while maintaining an exemplary record of safety and care since being first statutorily defined in 1909; and

Whereas, the statutes governing the practice of optometry have not been substantively updated to acknowledge advances in technology since 1977; and

Whereas, the continued expansion of optometric services in North Carolina will greatly improve access and affordability of eye care to the citizens of North Carolina; Now, therefore, The General Assembly of North Carolina enacts:

SECTION 1. G.S. 90-114 reads as written:

"§ 90-114. Optometry defined.

- (a) Any one or any combination of the following practices shall constitute the practice of optometry:
 - (1) The examination of the human eye by any method, other than surgery,method to diagnose, to treat, or to refer for consultation or treatment any abnormal condition of the human eye and its adnexa; or
 - (2) The employment of instruments, devices, pharmaceutical agents and procedures, other than surgery, procedures intended for the purposes of investigating, examining, treating, diagnosing or correcting visual defects or abnormal conditions of the human eye or its adnexa; or
 - (3) The prescribing and application of lenses, devices containing lenses, prisms, contact lenses, orthoptics, vision training, pharmaceutical agents, and prosthetic



- devices to correct, relieve, or treat defects or abnormal conditions of the human eye or its adnexa.

 (b) Performance of the following procedures shall not constitute the practice of optometry, except for the preoperative and postoperative care associated with these procedures:

 (1) Retina laser procedures, LASIK, and PRK.

 (2) Nonlaser surgery related to removal of the eye from a living human being.
 - (2) Nonlaser surgery related to removal of the eye from a living human being.
 (3) Nonlaser surgery requiring full thickness incision or excision of the cornea or sclera other than paracentesis in an emergency situation requiring immediate reduction of the pressure inside the eye.
- 9 reduction of the pressure inside the eye.
 10 (4) Penetrating keratoplasty (corneal transplant), Photo Therapeutic Keratectomy,
 11 or lamellar keratoplasty.
 - (5) Nonlaser surgery requiring incision of the iris and ciliary body, including iris diathermy or cryotherapy.
 - (6) Nonlaser surgery requiring incision of the vitreous.
 - (7) Nonlaser surgery requiring incision of the retina.
 - (8) Nonlaser surgical extraction of the crystalline lens.
 - (9) Nonlaser surgical intraocular implants.
 - (10) Incisional or excisional nonlaser surgery of the extraocular muscles.
 - (11) Nonlaser surgery of the eyelid for eyelid malignancies or for incisional cosmetic or mechanical repair of blepharochalasis, ptosis, or tarsorrhaphy.
 - (12) Nonlaser surgery of the bony orbit, including orbital implants.
 - (13) <u>Incisional or excisional nonlaser surgery of the lacrimal system other than lacrimal probing or related procedures.</u>
 - (14) Nonlaser surgery requiring full thickness conjunctivoplasty with graft or flap.
 - (15) Any nonlaser surgical procedure that does not provide for the correction and relief of ocular abnormalities.
 - (16) <u>Laser or nonlaser injection into the posterior chamber of the eye to treat any</u> macular or retinal disease.
 - (17) The administration of general anesthesia.
 - (18) Procedures performed under general anesthesia."

SECTION 2. G.S. 90-118 is amended by adding a new subsection to read:

"(e1) The Board shall identify any procedure, technique, or treatment modality which the Board determines to require additional education, training, or experience in order for the optometrist performing the procedure, utilizing the technique, or employing the treatment modality to do so with the requisite skill and standard of care. No optometrist licensed in this State shall perform an identified procedure, technique, or treatment modality unless the optometrist (i) has submitted to the Board evidence of satisfactory completion of all requirements established by the Board to perform the identified procedure, technique, or treatment modality and (ii) has been certified by the Board as qualified to perform the identified procedure, technique, or treatment modality."

SECTION 3. A committee appointed by the Optometry Board, consisting of five licensed optometrists and five licensed ophthalmologists, shall recommend to the Board by July 31, 2017, education, training, or other requirements to perform any procedure, technique, or treatment modality identified by the Board under G.S. 90-118(e1), as enacted by Section 2 of this act. The Board, after consideration of the committee's recommendations, shall establish appropriate protocols and criteria for the certification of optometrists to perform each procedure, technique, or treatment modality identified by the Board. The Board may appoint additional committees as it deems appropriate in the future to recommend modifying or establishing requirements for certification by the Board under G.S. 90-118(e1), as enacted by Section 2 of this act.

General Assembly Of North Carolina

Session 2017

SECTION 4. Section 1 of this act becomes effective January 1, 2018. The remainder of this act is effective when it becomes law.

Senate Bill 342-First Edition