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## ***Detailed Fiscal Analysis***

The bill modifies the prescriptive authority of optometrists holding therapeutic pharmaceutical agent (TPA) certificates and topical ocular pharmaceutical agent (TOPA) certificates. Under current law, an optometrist who holds a TPA certificate may employ, apply, administer, and prescribe instruments, devices, procedures, and therapeutic pharmaceutical agents for (1) examination, investigation, diagnosis, or prevention of any disease, injury, or other abnormal condition of the visual system or (2) treatment or cure of any disease, injury, or other abnormal condition of the anterior segment of the human eye. Under the bill, an optometrist who holds a TPA certificate is practicing within the scope of the optometrist's scope of practice when he or she administers or prescribes a drug to (1) diagnose, treat, or prevent injury of the visual system or (2) treat or manage a disease or any other abnormal condition within or originating from the visual system. There are no apparent direct fiscal effects of this provision in the bill on the state or local subdivisions.

Under the bill, an optometrist who holds a TOPA certificate may administer a drug topically for evaluative purposes for the practice of optometry as the application of optical principles, through technical methods and devices, in the examination of human eyes for the purpose of ascertaining departures from the normal, measuring their functional powers, adapting optical accessories for the aide thereof, and detecting ocular abnormalities that may be evidence of disease, pathology, or injury. There is no apparent direct fiscal effect of this provision in the bill on the state or local subdivisions.

The bill also requires the Board of Optometry to adopt rules governing the authority of optometrists holding therapeutic pharmaceutical agent (TPA) certificates to administer or administer and prescribe controlled substances. Rules adopted must be in accordance with ORC Chapter 119. in consultation with the State Board of Pharmacy, and must comply with the following: (1) restrictions on an optometrist from administering or prescribing Schedule III controlled substances other than those included in the "narcotics-narcotic preparations" category on the list of controlled substances prepared by the Board of Pharmacy or an equivalent of those drugs, (2) limitations on the list of Schedule III controlled substances that an optometrist may administer or prescribe under a TPA certificate to those the Board determines are appropriate for use in optometric practice, (3) protocols established for prescribing Schedule III controlled substances to be followed by optometrists who hold TPA certificates, taking into account the prescription protocols that exist within the health care marketplace and are used in other states that grant optometrists the authority to prescribe drugs, and (4) standards and procedures governing the administration and prescription of Schedule III controlled substances by taking into consideration and examining issues that include appropriate length of drug therapy, appropriate protocols of drug treatment, necessary monitoring systems, and any other factors the Board considers relevant. In addition, the Board must conduct an annual review of the rules.

According to a spokesperson at the Board of Optometry, additional board meetings may be required to promulgate rules. The average cost of an additional board meeting is \$1,200. In addition, the Board must provide public notice and hearings to promulgate new rules.

Current law requires an optometrist provide one copy of the prescription to the patient. The prescription must include the issuance date and sufficient information for the patient to obtain the vision correction item, device, or procedure from a supplier of the patient's choice. The bill adds additional information to the prescription that includes: (1) patient's name, (2) patient's examination date, (3) prescription issue and expiration dates, (4) prescriber's name, address, telephone, and fax number, (5) contact lens power and material or manufacturer, (6) base curve or appropriation designation, (7) diameter, where appropriate, and (8) with private label contact lenses, manufacturer's name, private label brand trade name, and, if applicable, equivalent brand name's trade name. There are no apparent direct fiscal effects of this provision in the bill on the state or local subdivisions.

Under current law, the Board must protect the confidentiality of patients and persons who file complaints with the Board when conducting all investigations and proceedings. The bill provides that the Board may share any information it receives pursuant to an investigation, including patient records, with other licensing boards and governmental agencies that are investigating alleged professional misconduct and with law enforcement agencies and other governmental agencies that are investigating or prosecuting alleged criminal offenses. Investigating boards or agencies must comply with the Board's confidentiality requirements despite any conflicting provision of law or procedure of that board or agency's laws or procedures. Complying with this requirement may result in a negligible increase, if any, in administrative costs.

Currently, all licensed optometrists must complete between 6 and 25 clock hours of continuing education each year. Current law also requires that each licensed optometrist who holds a TPA or TOPA certificate complete at least five hours of continuing education on pharmacology each year. Provisions in the bill require that all licensed optometrists complete 25 clock hours each year and increases the number of continuing education focused on pharmacology hours from 5 to 10 hours for licensees with TPA or TOPA certificates and extends this requirement to all optometrists. This requirement may result in a negligible increase, if any, in administrative costs to the Board to track the change in continuing education requirements.

The bill also modifies the Board's license renewal notification schedule. Instead of sending a second renewal notice not later than December 1, the Board must mail the second renewal notice not later than December 15. In addition, the bill requires a third renewal notice be sent before the Board classifies the optometrist's certificate as delinquent, if applicable. The additional renewal notification would result in an increase in administrative costs to the Board.

Current law allows students studying optometry in an optometry school in Ohio to practice optometry without a license while enrolled in the school if the student is in an optometry training program. The bill provides that a student enrolled in an optometry program in Ohio or another state may practice optometry if the student is participating in a training program in Ohio provided or sponsored by the out-of-state school. According to a spokesperson at the Board, this provision in the bill would not affect revenues or expenditures.

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