

MAINE STATE LEGISLATURE

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MINORITY
BUSINESS AND ECONOMIC DEVELOPMENT

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STATE OF MAINE
HOUSE OF REPRESENTATIVES
117TH LEGISLATURE
FIRST REGULAR SESSION

COMMITTEE AMENDMENT "B" to H.P. 590, L.D. 800, Bill, "An Act to Amend the Laws Related to Optometry"

Amend the bill in section 1 in paragraph A in the 3rd line (page 1, line 8 in L.D.) by inserting after the following: "techniques" the following: 'or tissue-altering lasers'.

Further amend the bill in section 2 in paragraph C in the last line (page 1, line 21 in L.D.) by inserting after the following: "surgery" the following: 'and tissue-altering lasers'

Further amend bill in section 3 in subsection 3 in the 2nd line (page 1, line 27 in L.D.) by striking out the following: "~~topical any~~" and inserting in its place the following: 'topical'

Further amend the bill in section 3 in subsection 3 in the last line (page 1, line 29 in L.D.) by striking out the following: "disease." and inserting in its place the following: 'disease; and analgesics, including controlled substances identified in Schedules III, IV and V as described in 21 United States Code, Section 882.

Prior to administration of an analgesic, an optometrist shall document in the patient's record a complete history of the current medications and past drug allergies and sensitivities of the patient. The optometrist must be familiar with the interactions of analgesics with other medications.

An optometrist shall administer Schedule III, IV and V controlled substances only under the following restrictions:

2 A. Administered only when a noncontrolled substance will
not result in sufficient relief;

4 B. No administration over 72 hours without referral from or
consultation with a physician skilled in the treatment of
6 the eye;

8 C. Only those analgesics shown to be effective for ocular
10 pain;

12 D. A prescription dosage may not exceed in quantity the
recommended analgesic dose for that analgesic;

14 E. No refills without further examination and follow-up
16 care; and

18 F. No maintenance of inventories for dispensing and
administering.'

20 Further amend the bill by striking out all of sections 4 and
22 5 and inserting in their place the following:

24 **'Sec. 4. Glaucoma Study Panel.**

26 **1. Panel established.** There is created the Glaucoma Study
Panel, referred to in this section as the "panel." The panel is
28 charged to study and make recommendations as to whether
optometrists should be allowed to treat glaucoma.

30 **2. Membership.** The panel consists of 5 members to be
32 appointed by the Commissioner of Professional and Financial
Regulation as follows:

34 A. One licensed optometrist from recommendations submitted
36 by the State Board of Optometry;

38 B. One licensed ophthalmologist from recommendations
submitted by the Board of Licensure in Medicine;

40 C. A licensed physician with a specialty in internal
42 medicine from recommendations submitted by the Board of
Licensure in Medicine;

44 D. One person skilled in program evaluation; and

46 E. One licensed pharmacist from recommendations submitted
48 by the Board of Commissioners of the Profession of Pharmacy.

50 Members must be guided by the best interest of the general public
and not the interests of their own professions.

2 **3. Convening.** The Commissioner of Professional and
3 Financial Regulation shall call the first meeting of the panel to
4 take place within 15 days of the effective date of this Act.

6 **4. Chair.** The Commissioner of Professional and Financial
7 Regulation shall appoint the chair of the panel.

8 **5. Staff.** The Board of Licensure in Medicine and the State
9 Board of Optometry shall provide staffing by current personnel.

11 **6. Duties.** The panel shall:

12 A. Determine whether optometrists should be allowed to
13 treat glaucoma;

14 B. Specify any limitations or special qualifications
15 relative to this treatment, including the need for
16 additional qualifications and consultation and referral
17 requirements;

18 C. Determine whether recommendations concerning the State
19 Board of Optometry contained in the report of the Joint
20 Standing Committee on Audit and Program Review pursuant to
21 the Maine Revised Statutes, Title 3, section 927 have been
22 implemented by the board;

23 D. Recommend a procedure for ongoing oversight of the State
24 Board of Optometry if it is recommended that optometrists be
25 allowed to treat glaucoma. This recommendation must include
26 methods for ascertaining whether the board is acting within
27 its authority and for determining whether complaint
28 procedures are being well publicized and complaint data are
29 being accurately compiled. Consideration must be given to
30 utilizing the legislative sunset audit procedure as a means
31 of accomplishing the purposes of this paragraph; and

32 E. If it is recommended that optometrists be allowed to
33 treat glaucoma, recommend a detailed evaluation program to
34 determine the incidence of misdiagnosis, mistreatment and
35 misuse of drugs by optometrists. The panel shall include in
36 its recommendations the agency or agencies to be responsible
37 for final design, conduct and review of this evaluation.

38 In formulating its responses to these issues, the panel shall
39 provide detailed, specific answers. The panel may not recommend
40 that answers be left to board rulemaking.

41 **7. Report to the Legislature and Governor.** The panel shall
42 prepare and submit a report to the Joint Standing Committee on
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Business and Economic Development, the Executive Director of the Legislative Council and the Law and Legislative Reference Library. If the panel recommends that optometrists be allowed to treat glaucoma, the report must include recommended legislation putting the details of the recommended scope of practice and qualifications into statute. The report must be submitted on January 15, 1996. The Joint Standing Committee on Business and Economic Development may submit legislation based on the findings of the panel.'

Further amend the bill by inserting at the end before the statement of fact the following:

FISCAL NOTE

The State Board of Optometry will incur some minor additional costs to adopt rules pertaining to the scope of the practice of optometry. These costs can be absorbed within the board's existing budgeted resources.

The State Board of Optometry, the Board of Licensure in Medicine and the Board of Commissioners of the Profession of Pharmacy, all within the Department of Professional and Financial Regulation, will incur some minor additional costs to participate in a study pertaining to glaucoma. These costs can be absorbed within the boards' existing budgeted resources.'

STATEMENT OF FACT

This is the minority report of the Joint Standing Committee on Business and Economic Development.

Current law prohibits the use of surgery, laser or other invasive techniques for care of the eyes by optometrists. The bill would have changed that prohibition to include invasive surgery only. This amendment prohibits the use of tissue-altering lasers and invasive surgery.

With special education, current law the use of allows ocular topical pharmaceutical agents for the treatment of eye conditions or diseases other than glaucoma, except for the use of controlled substances, injections and agents for the treatment of diseases that affect the entire system. The bill would have allowed the use of any pharmaceutical agent, including Schedule III, IV and V controlled substances, for the treatment of any eye condition including glaucoma.

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2 This amendment allows the use of pain relievers for 72 hours
after which there must be consultation with or referral to a
4 physician skilled in the treatment of the eye.

6 The amendment submits to the study panel the issue of
whether optometrists possess the education and training necessary
8 to treat glaucoma.