

Optometry's Essential and Expanding Role in Health Care: Assured Quality and Greater Access for Healthier Communities

White Paper

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EXECUTIVE SUMMARY

A two-decade drumbeat of bold, future-focused and entirely bi-partisan changes in U.S. state laws has ushered in the modern practice of optometry. The result has been a dramatic expansion of the profession's independent physician role in health care coupled with the increased ability of those in need of eye health and vision care to directly access personalized quality, comprehensive eye health care provided by doctors of optometry in their home communities through a choice of practice settings.

Since 1998, state affiliates of the American Optometric Association have supported and played a positive role in enacting 62 laws in 47 states expanding optometric scope of practice, in turn, granting tens of millions of patients the ability to select doctors of optometry for their essential medical eye health and vision care. Over the same period of time, associations covering all 50 states and the District of Columbia, successfully reduced insurance restrictions and eliminated other barriers to access to doctors of optometry chosen by a patient, including the enactment of powerful "any willing provider" laws. State association advocacy has also resulted in patient safety laws in 23 states, protecting the public from online vision tests, illegal contact lens sales and other dangerous health and medical device-related scams.

This policy direction reflects the notably positive trust relationship between doctors of optometry and their patients and, more broadly, the increasing public recognition of doctors of optometry as the primary eye care providers for families, often delivering care across generations, while practicing in more than 10,176 communities nationwide or counties accounting for 99 percent of the total U.S. population. At the same time, there remain outdated, misguided, politically-influenced and even arbitrarily-drawn laws in the majority of states still imposing harsh burdens on patients by delaying or denying critical access and continuity of care, all at significant individual and systemic cost.

As was the case with successful advocacy-inspired updates to state practice acts prior to 1998 (see Appendix A), in virtually all instances, opposition to optometric scope expansion is typically limited to the specific health care special interests that face increased economic pressures arising from it. By 2019, their decades-old reflexive and diversionary opposition, based on an array of false claims, is facing new scrutiny, even becoming the focus of competition and "cease and desist" directives (see Appendix B) from the public health and patient advocacy community.

In this report, we explore the main benefits of state optometric scope of practice expansion and provide a logical framework through which to assess the value of scope of practice expansion. This report is divided into four sections: Introduction, Analysis, Cost-Benefit, and Public Perception.

The Analysis section documents the need for improvements in access to eye health and vision care, and discusses the literature supporting the ten important domains that form the basis for the value

proposition underlying scope of practice expansion. The Cost-Benefit section provides a simple model to derive the monetary value of scope of practice expansion. We determined that scope of practice expansion adds \$600 million per year in transaction costs savings and another \$4 billion per year in savings attributable to access-related improvements in health outcomes. Finally, the public perception survey found that nearly all voters nationwide consider having access to eye health and vision care a priority; 96% of voters deemed it as either very or somewhat important. Americans want access and ease. In sum, this research provides strong support for scope of practice expansion for doctors of optometry in the U.S.