

Dear Vermont House Government Operations Committee Members,

I am an older Ophthalmologist who has practiced in Chittenden County for close to 30 years. Given that I am in the latter stage of my career I have very little financial interest in the outcome of S.64 and, thus, I am writing primarily in relation to quality and safety.

Procedural interventions in Medicine demand extensive training. Performing a couple or a few lasers or injections or etc is not even in the proper universe of training for it to be reasonably safe for these sorts of medical interventions to be carried out by providers other than MD surgeons. Indeed, even knowing when these kinds of treatments are and are not truly indicated demands extensive MD-level training. Ask yourselves whom you'd trust for this level of care were it your eye or your loved one's eye that was "sick" enough that it needed a laser or a medication injection or the like; truly – this is a "common sense" matter.

There is always access to emergent MD ophthalmic care in our region. Direct provider-to-provider discussions about patients' needs will virtually never leave an urgently-in-need patient high and dry.

MD Ophthalmologists and OD Optometrists are virtually always paid identically by governmental (Medicare and Medicaid) and commercial insurers for medically-necessary eye care.

As you can see, above, I do not believe any of S.64's proposed expansion of scope of optometric practice is reasonably safe and in the public's best interest. That being said, this week's "Stone Amendment" does take a reasonable stab at putting some common-sense guardrails abutting this train and, thus, this bill is meaningfully better as amended. Ultimately, what do I truly think is needed? If you were not convinced by the arguments against expansion that our own Office of Professional Regulation (OPR) recently made, after detailed study required by the Legislature, you should ask them to revisit the matter and report back, again. The safety stakes are huge.

Vermonters need you and your colleagues to guard against safety and quality "slippery slopes". Decisions regarding the needs – of lack thereof – for and performance of surgical procedures should be in the hands of surgeons with the most thorough training. Period.

Thank you, in advance, for protecting public medical safety.

Sincerely,

David J Weissgold, MD
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