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January 30, 2026

To: Hon. Virginia Lyons, Chair

Senate Committee on Health and Welfare

From: Jennifer Colin, Director, Office of Professional Regulation

Emily Carr, General Counsel, Office of Professional Regulation

Re: S.64 – An act relating to amendments to the scope of practice for optometrists

Dear Committee Members:

Thank you for the opportunity to testify today in support of S.64 and the optometry scope expansion to include advanced surgical, laser, and injection procedures.

Our overview today will be familiar, as we testified last year on this bill. First, we will briefly review OPR's two reports in 2020 and 2023, assessing whether the optometry scope of practice should be expanded to allow a specialty authorizing the performance of advanced procedures. Then we will discuss the qualifications and requirements OPR recommends for the Advanced Therapeutic Procedures Specialty. Finally, we will briefly mention the next steps for OPR if the legislation passes.

OPR's 2020 Study of Optometric Advanced Procedures

In 2019, the General Assembly directed the Office of Professional Regulation in Act 30 to conduct a regulatory review to “evaluate the safety and public health needs of enlarging the scope of practice of optometrists to include advanced procedures.” OPR submitted the study in January 2020, which documented a significant challenge in assessing the proposed scope expansion. None of the 21 schools of optometry that OPR contacted to learn about the training and education of optometrists responded sufficiently to OPR’s request for information. Furthermore, after soliciting patient feedback through Vermont-licensed optometrists, only a handful of optometry patients shared with OPR experiences of delay in or difficulty accessing the proposed advanced procedures in

Vermont from ophthalmologists. Thus, OPR was not able to conclude that: (1) optometrists had the necessary training and education to safely perform advanced procedures or (2) Vermont patients needed expanded access to the proposed advanced procedures. For these reasons and others listed in the [2020 Report](#), OPR recommended against the proposed scope expansion.

2022 SGO Request for a Revised Report and Proposed Scope Expansion Language

During the 2022 legislative session, the Senate Government Operations Committee heard testimony regarding optometry scope expansion and concluded that the scope expansion should be pursued. The SGO Committee asked OPR to revise its 2020 report and specified five criteria for OPR to evaluate, including: testimony provided to the Committee, scope expansions in other states and how those states ensure public protection, scope expansion in the Veterans Administration, and other information that was to be provided by the Vermont Optometric Association and the American Optometric Association. In addition, the Committee asked OPR to identify what proposed scope expansion language the Agency would support. In light of OPR's mandate to protect the public, the SGO's request for proposed expansion language was viewed as a request for language that would allow optometrists to perform some or all of the expanded procedures in a manner that protects the public from harm.

OPR's 2023 Optometry Scope of Practice Report

Process

To determine what, if any, legislative language would appropriately satisfy the request, OPR reviewed the sources and testimony provided to the SGO Committee, as well as the additional materials submitted by stakeholders and the public. OPR conducted additional research and engaged in extensive discussions with stakeholders and the public. OPR also received and reviewed public written comments. Importantly, for the revised report, OPR did finally obtain much needed information regarding educational programs, their components and standards to better understand the preparation pathway for optometrists pursuing the advanced procedures scope expansion. Significantly, OPR found that there is a difference in optometry education provided prior to 2019 as opposed to post-2019. After 2019, the skills and procedures within the proposed advanced therapeutic procedures specialty are widely taught within a standard optometry graduate program.

Findings and Recommendations

In October 2023, OPR submitted its [Optometry Scope of Practice Report](#) to the legislature. In the Report, OPR found that optometrists with adequate education, experience, and examination could safely perform specific injection, laser, and surgical procedures. OPR recommended a scope expansion authorizing the issuance of an Advanced Therapeutic Procedures Specialty, including the following procedures:

1. Surgery - to remove lesions from the eye and adnexa and the accompanied restoration of tissue, including only the following:
 - excision and repair of nonrecurrent chalazia;
 - excision and biopsy of nonrecurrent lesions of the adnexa without characteristics or obvious signs of malignancy, excluding any lesion involving the eyelid margin, involving the lacrimal supply or drainage systems, deeper than the orbicularis muscle, or larger than five millimeters in diameter;
 - closure of wounds resulting from removal of a lesion;
 - repair of an eyelid laceration not larger than 2.5 centimeters, not deeper than the orbicularis muscle and not involving the eyelid margin or lacrimal drainage structures; and
 - corneal crosslinking procedure, which is the use of medication and ultraviolet light to make the tissues of the cornea stronger.

2. Laser Procedures:

- laser capsulotomy;
- laser peripheral iridotomies; and
- laser trabeculoplasty.

3. Injections:

- injections of therapeutic pharmaceutical agents into the eyelid or its adnexa, including into the subconjunctival space, and including injections for the removal of chalazia and injections to administer local anesthesia;
- injections to perform fluorescein angiography
- injections of epinephrine for treatment of anaphylactic shock; and
- if authorized by the Commissioner of Health during a public health emergency, vaccinations for systemic health reasons.

OPR recommended the following qualifications to issue the Specialty for Advanced Procedures:

- Hold an optometrist license in Vermont.
- Complete a post-graduate residency with, at minimum, simulated experience in the advanced procedures.
- Complete a preceptorship with a qualified preceptor who directly supervises the optometrist in performing specified procedures on live human patients.
- Successfully pass the National Board of Examiners of Optometry Injections Skills Examination and Laser and Surgical Procedures Examination. These examinations test the clinical skills and education necessary to hold a specialty license.
- Additionally, for optometrists that graduated before advanced procedures coursework was a part of the optometry school and college curricula, completion of a 32-hour post-graduate course in the advanced procedures.

OPR further recommended that optometrists with the specialty must report to OPR every two years the outcomes of all advanced procedures performed, as well as any

adverse events within three weeks of occurring. In conjunction with licensure renewal, optometrists with the specialty must complete an additional five hours of continuing education in the advanced procedures every two years. Finally, OPR recommended clarifying that optometrists with the specialty may prescribe and administer therapeutic pharmaceuticals but are prohibited from prescribing schedule I or II controlled drugs, except hydrocodone in combination with analgesics, which would be allowed in minimal quantity.

OPR's Position on the Proposed Language in S.64

OPR supports the scope expansion and language in S.64, as the bill implements most of the recommendations from the 2023 Revised Report. Based on its research, the testimony, review of implementation in other states, and further discussions with the Vermont Optometric Association, OPR believes that the educational, experiential and examination requirements of the legislation will protect the public from harm as optometrists in Vermont embark on this expanded scope of advanced practice.

The primary differences between the recommendations in OPR's 2023 report and the proposed legislation are removal of the post-graduate residency and reduction of the preceptorship hours from 100 down to 8. OPR's reconsideration of these components came about through multiple conversations with the VOA (Vermont Optometrist Association), reconsideration of the hands-on experience gained in the procedures performed in the preceptorship, and the assurance that the two required examinations by National Board of Examiners of Optometry would adequately test the skills and education necessary to ensure public protection. Despite the decrease in hours of the preceptorship, the following procedures must still be completed within the preceptorship under the direct supervision of a qualified preceptor:

- (A) at least two laser trabeculoplasties;
- (B) at least two posterior capsulotomies;
- (C) at least two laser peripheral iridotomies;
- (D) at least two chalazion excisions;
- (E) at least two chalazion intralesional injections;
- (F) at least two excisions OR drainages of an authorized lesion of two millimeters or greater in size.

Implementation

If S.64 passes, OPR will need to set up the infrastructure necessary to implement the legislation. This will include IT set up, rulemaking, and stakeholder outreach. Because of other significant legislative projects in OPR's queue, we are concerned about the January 1, 2027 effective date, as we will not have rulemaking completed by this date. OPR requests to amend the effective date to no earlier than July 1, 2028.