



State of Vermont  
Department of Health

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Agency of Human Services

February 4, 2026

To: Senate Health and Welfare Committee  
From: Matthew Greenberg, MD, FACEP  
Chair, Vermont Board of Medical Practice  
Re: S. 64

Good Morning Chairperson and Members of the committee,

My name is Matt Greenberg. I am an emergency physician with 25 years of experience in the field; the last 15 working here in Central Vermont. I come to you here this morning with that experience, but mainly to speak on behalf of the Vermont Board of Medical Practice that I currently chair. To be clear: although I frequently care for people with eye injuries and infections, I am not an eye specialist. Frankly, if there is one thing I have learned in my quarter century as an Emergency Physician, it is to respect the eye for its unique anatomy and complex function. Further, I do not perform any of the eye surgeries this bill will allow optometrists to perform.

As many of you likely know, the Vermont Board of Medical Practice has reviewed this and similar bills in the past. We most intensively reviewed its merits from October 2023 through February of 2024. At that time, we unanimously voted to **OPPOSE** the expansion of optometry scope of practice. We did not take this vote lightly and reviewed the evidence available at the time. Although without formal votes, we have reconsidered the issue in January of 2025 and again in January of 2026. On both occasions we did not feel enough had changed to warrant a change in our position.

Ultimately the board decided not to support this bill for three main reasons:

1. **No anticipated benefits in access.** One of the primary health care concerns to the citizens of Vermont has been timely access to the care they need. This argument has been used to promote expansion of skills in a number of different fields. The idea is that more people doing a particular procedure will make it more readily available. Unfortunately, data has not shown this to be the case. For example, a 2023 study in the *Journal of Ophthalmology* did not show any shortened travel time (a surrogate for access) in several states that had previously expanded optometry scope of practice. OPR's own 2023 analysis could not determine if there would be a benefit to access. Anecdotally several members of our committee noted access to optometry care is already limited throughout the state with significant wait times. Adding more surgical procedures to these optometrists could, in fact, increase wait times.



2. **No anticipated benefits in cost.** This is also an area of concern with conflicting information. There is some data to show that expanding scope increases the number of procedures done and hence increases cost. The data is murky at best. Again, OPR's own 2023 analysis was unable to determine if there would be a benefit to cost. There are clear arguments to both sides.
3. Without clear benefit to access or cost it really comes down to the third reason: **Quality and the safety of the eyes of the citizens of Vermont.** Quality, safety, and respectful care are the primary concern of the VBMP. Fundamentally, this is a matter of numbers and experience: Simply put, ophthalmologists have far more extensive training in eye surgery than optometrists. As has been recognized by numerous medical safety organizations, there is a minimum number of times a procedure must be done to achieve and then maintain proficiency. The bill itself only requires the performance of 2 of each of the surgeries. During a 4 to 6 year ophthalmology residency (after 4 years of medical school) the average ophthalmologist will have performed hundreds of surgeries. This is a stark difference and the argument for the board that held the most sway. When it comes to the human eye and all the importance that society places on vision, we, as a board, felt that this difference was sufficient enough to not change the current accepted standards.

Thank you for your time and consideration. I would welcome any questions.

Respectfully submitted,

A handwritten signature in blue ink that reads "Matthew Greenberg". The signature is fluid and cursive, with the first name "Matthew" and last name "Greenberg" clearly legible.

Matthew Greenberg, MD, FACEP  
Chair, Vermont Board of Medical Practice