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Date: (Filing No. S- )

**HEALTH COVERAGE, INSURANCE AND FINANCIAL SERVICES**

Reproduced and distributed under the direction of the Secretary of the Senate.

**STATE OF MAINE  
SENATE  
132ND LEGISLATURE  
SECOND REGULAR SESSION**

COMMITTEE AMENDMENT “ ” to S.P. 702, L.D. 1803, “An Act to Amend the Laws Governing Optometric Practice”

Amend the bill by striking out everything after the enacting clause and inserting the following:

**'PART A**

**Sec. A-1. 32 MRSA §19101, sub-§24**, as enacted by PL 2023, c. 580, §8, is repealed and the following enacted in its place:

**24. Practice of optometry.** "Practice of optometry" has the same meaning as described in section 19102.

**Sec. A-2. 32 MRSA §19102** is enacted to read:

**§19102. Practice of optometry**

The following provisions describe the practice of optometry for the purposes of this chapter.

**1. Definitions.** For the purposes of this section, unless the context otherwise indicates, the following terms have the following meanings.

A. "Diagnostic and therapeutic pharmaceutical agent" means any prescription or nonprescription drug delivered by any route of administration, which may be used or prescribed for the diagnosis, treatment, prevention or mitigation of abnormal conditions and diseases of the visual system or the human eye and its adnexa, including approved narcotics when used in the treatment of disorders or diseases of the eye and its adnexa.

B. "Ophthalmic surgery" means a procedure upon the human eye and its adnexa in which in vivo tissue is injected, cut, burned, frozen, sutured, vaporized, coagulated or photo disrupted by the use of surgical instrumentation, including, but not limited to, a scalpel, cryoprobe, laser or electric cautery, or by the use of ionizing radiation.

**COMMITTEE AMENDMENT**

1 "Ophthalmic surgery" does not include any surgical procedures that do not involve the  
2 eye or its adnexa.

3 **2. Practice of optometry.** The practice of optometry is the evaluation, diagnosis,  
4 prevention or treatment of diseases, disorders or conditions of the human vision system,  
5 eyes and adjacent and associated structures, including, in addition to all forms of care and  
6 treatment approved on the effective date of this subsection:

7 A. Measuring the powers and range of vision of the human eye using subjective and  
8 objective means, including the use of lenses, prisms and automated testing devices, to  
9 determine its accommodative and refractive state and general scope of function of  
10 human vision;

11 B. The adaptation, sale and dispensing of frames and lenses in all their forms to  
12 overcome errors of refraction and restore as near as possible normal human vision;

13 C. The adaptation, sale and dispensing of plano or zero power contact lenses;

14 D. Ordering appropriate diagnostic laboratory or imaging tests for the purpose of  
15 prescribing contact lenses for prosthetic or therapeutic purposes, including  
16 orthokeratology;

17 E. Ordering appropriate diagnostic laboratory or imaging tests to facilitate the  
18 provision of contact lenses for cosmetic purposes;

19 F. The use or prescription of lenses, prisms, vision therapy and vision rehabilitation;

20 G. The prescription of diagnostic and therapeutic pharmaceutical agents for ocular  
21 disease, by any delivery system necessary, including controlled substances included in  
22 schedules III, IV and V as described in 21 United States Code, Section 812;

23 H. The use and prescription of medical devices;

24 I. The removal of benign skin lesions of the eyelid;

25 J. The use of Kenalog injection for chalazions;

26 K. The removal of chalazions or benign skin tags of the eyelid, including the ordering  
27 of any biopsy, blood test or other appropriate diagnostic laboratory or imaging tests;

28 L. The prescription of oral and topical antihistamines or anti-allergy medication,  
29 including the prescription of medicated contact lenses;

30 M. The prescription of oral and topical anti-inflammatory medication, including  
31 steroids such as prednisone;

32 N. The prescription of oral and topical anti-glaucoma medication, including oral  
33 acetazolamide;

34 O. The use of therapeutic ultrasound, radio frequency and intense pulsed light  
35 treatments;

36 P. Ophthalmic surgery as expressly provided in this paragraph, except for the  
37 performance of the procedures described in subsection 3. An optometrist may utilize  
38 local anesthesia by injection in performing the following procedures:

39 (1) The intralesional injection of a steroid to treat a chalazion;

40 (2) The primary removal of a pedunculated skin tag;

- 1                   (3) The intradermal injection of a paralytic agent;  
2                   (4) The incision and curettage of a nonrecurrent chalazion; and  
3                   (5) The removal of foreign bodies from the eye not involving lid margin or lacrimal  
4                   drainage structures and extending no deeper than the orbicularis oculi muscle;

5                   Q. Selective laser trabeculoplasty to treat ocular hypertension or glaucoma;

6                   R. Posterior capsulotomy using an yttrium aluminum garnet laser to treat a posterior  
7                   capsule opacification; and

8                   S. Laser peripheral iridotomy to prevent or treat angle closure glaucoma.

9                   **3. Ophthalmic surgery procedures excluded from practice of optometry.** The  
10                   following ophthalmic surgery procedures are excluded from the practice of optometry,  
11                   except for the preoperative and postoperative care for those procedures:

12                   A. Retina laser procedures;

13                   B. Penetrating keratoplasty or corneal transplant of any kind;

14                   C. Surgery performed with general anesthesia, regional anesthesia or monitored  
15                   anesthesia care or the administration of such anesthesia;

16                   D. Injection into the vitreous chamber of the eye to treat any retinal or macular disease;

17                   E. Laser-assisted in situ keratomileusis;

18                   F. Corneal implants;

19                   G. Surgery related to removal of the eye from a living human being;

20                   H. Surgery requiring full thickness incision or excision of the cornea or sclera;

21                   I. Surgery requiring incision of the iris and ciliary body, including diathermy or  
22                   cryotherapy;

23                   J. Vitrectomy;

24                   K. Retinal surgery;

25                   L. Surgical extraction of an intraocular or crystalline lens;

26                   M. Surgical implantation of an intraocular lens;

27                   N. Incisional or excisional surgery of the extraocular muscles;

28                   O. Surgery of the eyelid for confirmed malignancies or for incisional cosmetic or  
29                   incisional mechanical repair;

30                   P. Surgery of the orbit;

31                   Q. Incisional or excisional surgery of the lacrimal system; and

32                   R. Surgery requiring full thickness conjunctivoplasty, including pterygium or  
33                   pinguecula excision.

34                   **4. Credentialing requirements for ophthalmic surgery and laser procedures.** A  
35                   person may not perform ophthalmic surgery or laser procedures unless the person has  
36                   satisfied the credentialing requirements established by the board. At a minimum, the  
37                   credentialing requirements must:

1           A. Require an optometrist to be a graduate of an accredited optometry school and hold  
2           an active state license in good standing;

3           B. Require an optometrist to:

4                   (1) Have received a passing score on the laser examination and on the surgical  
5                   procedures examination offered by the National Board of Examiners in Optometry;  
6                   or

7                   (2) If the optometrist graduated from an accredited optometry school prior to July  
8                   1, 2024, have satisfactorily completed a course approved by the board that is at  
9                   least 32 hours in length, that includes content related to each procedure set forth in  
10                   subsection 2, paragraphs P, Q, R and S and that is proctored by an ophthalmologist  
11                   or an optometrist authorized to perform all of the procedures set forth in subsection  
12                   2, paragraphs P, Q, R and S by the licensing board in a state in which a qualified  
13                   optometrist may perform these procedures; and

14           C. Demonstrate competency in the performance of laser procedures by participating in  
15           8 additional hours of working under a preceptor who is either a licensed  
16           ophthalmologist or licensed and credentialed optometrist. The preceptor must be  
17           licensed to perform the laser procedures, and the training must take place in the state  
18           in which the preceptor is licensed. The supervising ophthalmologist or optometrist shall  
19           notify the board when competency has been demonstrated in the form and manner  
20           prescribed by the board.

21           **5. Mechanical work associated with eyeglasses with ophthalmic lenses.** This section  
22           does not prevent a person from doing the mechanical work associated with adapting, fitting,  
23           bending, adjusting, providing, replacing or duplicating eyeglasses with ophthalmic lenses.

24           **6. Construction.** This section may not be construed to limit the ability of an  
25           optometrist to use diagnostic or therapeutic instruments using laser, light, radio frequency  
26           or ultrasound technology in the performance of eye care or limit an optometrist's ability to  
27           perform ophthalmic surgery procedures other than those surgical procedures excluded  
28           under subsection 3, as long as the optometrist has satisfied the appropriate credentialing  
29           requirements of the board.

30           **7. Repeal.** This section is repealed January 1, 2033.

31           **Sec. A-3. 32 MRSA §19103** is enacted to read:

32           **§19103. Scope of practice; board authority**

33           The board shall adopt rules to further define the scope of practice of optometry in  
34           accordance with section 19102, subsections 2 and 3.

35           **Sec. A-4. 32 MRSA §19202, sub-§8,** as enacted by PL 2023, c. 580, §8, is amended  
36           to read:

37           **8. Authority to order a mental or physical examination.** The authority to direct a  
38           licensee or license applicant, who by virtue of an application for and acceptance of a license  
39           to practice under this chapter is considered to have given consent, to submit to an  
40           examination of the board's choice. With respect to a licensee, the board may order that  
41           licensee to submit to an examination whenever information is received by the board that  
42           would cause the board to reasonably determine that the licensee may be suffering from a  
43           mental illness or physical illness that may be interfering with competent practice under this

1 chapter or from the use of intoxicants or drugs to an extent that the use is preventing the  
2 licensee from practicing optometry competently and safely. A licensee or license applicant  
3 examined pursuant to an order of the board may not prevent the testimony of the examining  
4 individual or prevent the acceptance into evidence of the report of the examining individual  
5 in a proceeding under this chapter. The board may petition the District Court for immediate  
6 suspension of license if the licensee fails to comply with an order of the board to submit to  
7 a mental or physical examination pursuant to this subsection; ~~and~~

8 **Sec. A-5. 32 MRSA §19202, sub-§9**, as enacted by PL 2023, c. 580, §8, is amended  
9 to read:

10 **9. Report.** The duty to submit to the commissioner, on or before August 1st of each  
11 year, the board's annual report of its operations and financial position for the preceding  
12 fiscal year ending June 30th, together with comments and recommendations the board  
13 considers essential; and

14 **Sec. A-6. 32 MRSA §19202, sub-§10** is enacted to read:

15 **10. Advisory opinions; declaratory rulings.** The authority to issue advisory opinions  
16 and declaratory rulings related to this chapter and any rules adopted pursuant to this  
17 chapter.

18 **Sec. A-7. 32 MRSA §19204**, as enacted by PL 2023, c. 580, §8, is amended to read:  
19 **§19204. Rulemaking Rule-making authority**

20 The board shall adopt rules that are necessary for the implementation of this chapter.  
21 The rules may include, but need not be limited to, requirements for licensure, license  
22 renewal and license reinstatement as well as practice setting standards, including scope of  
23 practice, that apply to individuals licensed under this chapter. Rules relating to scope of  
24 practice are major substantive rules as defined in Title 5, chapter 375, subchapter 2-A. All  
25 other rules adopted pursuant to this chapter are routine technical rules as defined in Title 5,  
26 chapter 375, subchapter 2-A.

27 **Sec. A-8. 32 MRSA §19304, sub-§2, ¶A**, as enacted by PL 2023, c. 580, §8, is  
28 amended by amending subparagraph (2) to read:

29 (2) ~~Nothing in this~~ This paragraph may not be construed to permit the optometric  
30 use of pharmaceutical agents that are:

31 (a) Controlled substances identified in schedules I and II as described in 21  
32 United States Code, Section 812; and

33 (b) ~~Administered exclusively by subdermal injection, intramuscular injection,~~  
34 ~~intravenous injection, subcutaneous injection or retrobulbar injection, except~~  
35 ~~injections for the emergency treatment of anaphylactic shock; and~~

36 (c) For the specific treatment of a systemic disease unless the pharmaceutical  
37 agent is used specifically for an ocular disease.

38 **Sec. A-9. 32 MRSA §19308**, as enacted by PL 2023, c. 580, §8, is amended to read:  
39 **§19308. Standard of care**

40 A licensee shall be held to the same standard of care in diagnosis, treatment and  
41 management of patient care as that degree of skill and proficiency commonly exercised by

1 a physician with a specialty in eye care in this State. A licensee shall ensure that the services  
2 provided are consistent with the licensee's scope of practice, including the licensee's  
3 education, training, experience, ability, licensure and certification. A licensee shall carry  
4 malpractice insurance in an amount established by the board.

5 **Sec. A-10. 32 MRSA §19312, sub-§2, ¶D**, as amended by PL 2025, c. 390, Pt. A,  
6 §53, is further amended to read:

7 D. The dispensing party may dispense contact lenses only upon receipt of a written  
8 prescription, except that an optometrist may fill a prescription of another optometrist  
9 or a physician without a copy of the prescription. Mail order contact lens suppliers  
10 must be licensed by and register with the Maine Board of Pharmacy pursuant to section  
11 13751 and are subject to discipline by that board for violations of that board's rules and  
12 the laws governing the board. An individual who fills a contact lens prescription shall  
13 maintain a copy of that prescription for a period of § 10 years. A dispensing party other  
14 than an optometrist with an optometrist-patient relationship shall forward a copy of the  
15 details of a prescription for contact lenses to the optometrist with the optometrist-  
16 patient relationship.

17 **Sec. A-11. 32 MRSA §19602**, as enacted by PL 2023, c. 580, §8, is amended to  
18 read:

19 **§19602. Telehealth services permitted**

20 A person licensed under this chapter may provide telehealth services as long as the  
21 licensee acts within the scope of practice of the licensee's license, in accordance with any  
22 requirements and restrictions imposed by this ~~subchapter~~ chapter and in accordance with  
23 standards of practice.

24 **Sec. A-12. 32 MRSA §19605**, as enacted by PL 2023, c. 580, §8, is amended to  
25 read:

26 **§19605. Rulemaking**

27 The board shall adopt rules governing the provision of telehealth services ~~by a person~~  
28 ~~licensed under this chapter~~ in accordance with section 19204. These rules must establish  
29 standards of practice and appropriate restrictions for the various types and forms of  
30 telehealth services.

31 **Sec. A-13. Report.** No later than January 15, 2032, the State Board of Optometry  
32 shall submit a report to the joint standing committee of the Legislature having jurisdiction  
33 over optometry licensing matters recommending whether the Maine Revised Statutes, Title  
34 32, section 19102 should be repealed as required by Title 32, section 19102, subsection 7  
35 or if that section should be continued or modified. The joint standing committee of the  
36 Legislature having jurisdiction over optometry licensing matters may report out a bill based  
37 on the recommendation to the Second Regular Session of the 135th Legislature.

38 **Sec. A-14. Effective date.** This Part takes effect January 1, 2028.

39 **PART B**

40 **Sec. B-1. Commission to Review the State Board of Optometry.**  
41 Notwithstanding Joint Rule 353, the Commission to Review the State Board of Optometry,  
42 referred to in this section as "the commission," is established as follows.

- 1           **1. Membership.** The commission consists of 10 members appointed as follows:
- 2           A. Two members of the Senate, appointed by the President of the Senate, including a
- 3           member from each of the 2 parties holding the largest number of seats in the
- 4           Legislature;
- 5           B. Two members of the House of Representatives, appointed by the Speaker of the
- 6           House of Representatives, including a member from each of the 2 parties holding the
- 7           largest number of seats in the Legislature;
- 8           C. One physician licensed to practice in the State with a specialty in ophthalmology,
- 9           appointed by the President of the Senate;
- 10          D. One optometrist licensed to practice in the State, appointed by the Speaker of the
- 11          House of Representatives;
- 12          E. The Attorney General or the Attorney General’s designee;
- 13          F. The chair of the State Board of Optometry; and
- 14          G. Two members of the public, one each appointed by the President of the Senate and
- 15          the Speaker of the House of Representatives as long as the members do not have any
- 16          pecuniary interests in or connection to optometry, medicine or ophthalmology.
- 17          **2. Chairs.** The first-named Senate member is the Senate chair and the first-named
- 18          House of Representatives member is the House chair of the commission.
- 19          **3. Appointments; convening of commission.** All appointments must be made no later
- 20          than 30 days following the effective date of this section. The appointing authorities shall
- 21          notify the Executive Director of the Legislative Council once all appointments have been
- 22          completed. After appointment of all members, the chairs shall call and convene the first
- 23          meeting of the commission. If 30 days or more after the effective date of this section a
- 24          majority of but not all appointments have been made, the chairs may request authority and
- 25          the Legislative Council may grant authority for the commission to meet and conduct its
- 26          business.
- 27          **4. Duties.** The commission shall evaluate the State Board of Optometry, referred to in
- 28          this subsections as "the board," as follows:
- 29          A. The adequacy of staffing of the board pursuant to the Maine Revised Statutes, Title
- 30          32, section 19202, subsection 5;
- 31          B. The adequacy of funding of the board pursuant to the Maine Revised Statutes, Title
- 32          32, section 19202, subsection 4; and
- 33          C. The adequacy of legal assistance provided to the board by the Office of the Attorney
- 34          General.
- 35          **5. Staff assistance.** The Legislative Council shall provide necessary staffing services
- 36          to the commission, except that Legislative Council staff support is not authorized when the
- 37          Legislature is in regular or special session.
- 38          **6. Report.** The commission shall report its findings to the joint standing committee of
- 39          the Legislature having jurisdiction over matters concerning the State Board of Optometry
- 40          on or before March 1, 2027. The joint standing committee of the Legislature having
- 41          jurisdiction over matters concerning the State Board of Optometry may report out a bill to
- 42          the 133rd Legislature in 2027.

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**PART C**

**Sec. C-1. Appropriations and allocations.** The following appropriations and allocations are made.

**PROFESSIONAL AND FINANCIAL REGULATION, DEPARTMENT OF  
Optometry - Board of 0385**

Initiative: Establishes 0.5 Public Service Manager I position and provides funding for related All Other costs.

<b>OTHER SPECIAL REVENUE FUNDS</b>	<b>2025-26</b>	<b>2026-27</b>
POSITIONS - LEGISLATIVE COUNT	0.000	0.500
Personal Services	\$0	\$63,347
All Other	\$0	\$93,668
<b>OTHER SPECIAL REVENUE FUNDS TOTAL</b>	<b>\$0</b>	<b>\$157,015</b>

Amend the bill by relettering or renumbering any nonconsecutive Part letter or section number to read consecutively.

**SUMMARY**

This amendment, which is the majority report of the committee, replaces the bill.

Part A of the amendment, which takes effect January 1, 2028, makes changes to the provisions of the law governing optometrists by providing a more detailed explanation of what constitutes the practice of optometry. The definition of "practice of optometry" in current law does not include surgical procedures.

Under the amendment, certain types of ophthalmic surgeries and laser procedures are included in the practice of optometry and certain ophthalmic surgical procedures are specifically excluded. An optometrist may only perform ophthalmic surgery or laser procedures if the optometrist meets minimum credentialing requirements established in law and any additional requirements established by the State Board of Optometry in rule. The amendment repeals these provisions of the amendment January 1, 2033 and requires the board to recommend to the Legislature whether to continue, modify or repeal these provisions no later than January 15, 2032. The joint standing committee of the Legislature having jurisdiction over optometry licensing matters may report out a bill based on the recommendation to the Second Regular Session of the 135th Legislature.

Part A also broadens the authority of an optometrist to dispense and administer certain medications independently and removes language that prohibits an optometrist from administering drugs intravenously or by injection. The amendment directs the board to adopt rules to further define the scope of practice of optometry and establish credentialing requirements for ophthalmic surgery procedures. The rules are designated major substantive and are subject to legislative approval before final adoption. Finally, Part A requires an optometrist to obtain malpractice insurance in an amount established by the board and also makes minor changes to the provisions relating to telehealth services and filling contact lenses and spectacle prescriptions.

