

TO:	Members of the Maine Joint Standing Committee on Health Coverage, Insurance
	and Financial Services

FROM: American Osteopathic Association

DATE: May 5, 2025

SUBJECT: In OPPOSITION to L.D. 1803

The American Osteopathic Association (AOA), on behalf of the 197,000 osteopathic physicians (DOs) and medical students (OMSs) we represent nationwide, writes to express our shared concern with the Maine Osteopathic Association (MOA) regarding L.D. 1803, which inappropriately expands the scope of practice for optometrists and could place the health and safety of Maine's patients at risk.

L.D. 1803 allows optometrists to perform risky surgery on the eyeball and eyelid, broadens the range of pharmaceuticals that optometrists can prescribe and delegates the authority to establish optometrists' scope of practice to a board comprised of other optometrists. The AOA shares the MOA's concerns that expanding the scope of optometrists who do not complete the comprehensive medical education, training, and competency demonstration requirements that physician ophthalmologists complete, could endanger the welfare of Mainers.

Although optometry and ophthalmology share similar names and subject matter, they are significantly different. An optometrist holds a doctorate degree and a license to practice optometry, while an ophthalmologist is a specialized physician with a DO or medical doctor (MD) degree and a license to practice medicine. The tissue in and around the eye is extremely delicate and, if damaged, very difficult, if not impossible, to repair. For that reason, optometrists have historically been required to refer patients to an ophthalmologist for surgery because of the complexity of the procedures and the seriousness of the potential outcomes, which can include blindness.

The AOA supports the "team" approach to medical care because the physician-led medical model ensures that professionals with complete medical education and training are adequately involved in patient care. Physicians across the United States must meet the same education, training and testing requirements and practice in supervised environments that afford progressively greater autonomy before ultimately becoming eligible to treat patients on their own. While we value the contributions of all health care providers to the health care delivery system, we believe that optometrists' education and training lacks the comprehensive and robust requirements needed to safely perform the ophthalmological services described in this bill.

Ophthalmologists' education includes:

• Four years of medical school, which includes two years of didactic study totaling upwards of 750 lecture/practice learning hours just within the first two years, plus two more years of clinical rotations done in community hospitals, major medical centers and doctors' offices.

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- Physicians also complete a **comprehensive**, three-part licensing examination series designed to test their knowledge and ability to safely deliver care to patients before they are granted a license to independently practice medicine.
- **12,000 to 16,000 hours of supervised postgraduate medical education** ("residencies") completed over the course of **three to seven years**, during which DO and MD physicians develop advanced knowledge and clinical skills relating to a wide variety of patient conditions over the course of three to six years.
- DOs and MDs are then eligible to sit for the examination process to obtain board certification in their chosen specialty.

Optometrists' education includes:

- Generally, a **four-year** doctorate-level degree in optometry, **110 combined hours of coursework and clinical training** in general and ocular pharmacology, **one year of supervised experience**, and the completion of **a two-hour course in preventing medical errors**.
- Optometry programs in the United States and Canada require clinical training for their students during their final academic year; however, the **length is unspecified**.
- Typical clinical experiences vary in length from only eight to 16 weeks.

Optometrists are not physicians and lack the education, training, and competency demonstration requirements needed to safely perform the services described in this bill. For this reason, the AOA urges you to **oppose L.D. 1803**. Should you need any additional information, please contact Raine Richards, JD, Vice President of State and International Affairs, at rrichards@osteopathic.org.

Sincerely,

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Teresa A. Hubka, DO, FACOOG (Dist.), FACOG, CS President, AOA

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