

CHARLES D. BAKER

KARYN E. POLITO LIEUTENANT GOVERNOR

MIKE KENNEALY SECRETARY OF HOUSING AND ECONOMIC DEVELOPMENT

# Commonwealth of Massachusetts Division of Professional Licensure Board of Registration in Optometry

1000 Washington Street, Suite 710 Boston, Massachusetts 02118

EDWARD A. PALLESCHI UNDERSECRETARY OF CONSUMER AFFAIRS AND BUSINESS REGULATION

LAYLA R. D'EMILIA COMMISSIONER, DIVISION OF PROFESSIONAL LICENSURE

DATE: 6/30/2021

RE: POLICY/NOTICE: Topical and Oral Therapeutic Pharmaceutical Agents and

Glaucoma Certification (TPA+GC)

In response to the expanded scope of practice for optometrists licensed in Massachusetts, the Board of Registration for Optometry ("Board") issues the following policy/notice:

## (1) <u>Topical and Oral Therapeutic Pharmaceutical Agents and Glaucoma Certification</u> (TPA+GC):

Pursuant to M.G.L. c. 112, § 66C (a), A registered optometrist who is qualified by an examination for practice under section 68, certified under section 68C, and registered to issue written prescriptions pursuant to subsection (h) of section 7 of chapter 94C may:

- (i) use and prescribe topical and oral therapeutic pharmaceutical agents as defined in section 66B that are used in the practice of optometry, including those placed in schedules III, IV, V and VI pursuant to section 2 of said chapter 94C, for the purpose of diagnosing, preventing, correcting, managing or treating glaucoma and other ocular abnormalities of the human eye and adjacent tissue; and
- (ii) prescribe all necessary eye-related medications, including oral antiinfective medications; provided, however, that a registered optometrist shall not use or prescribe: (A) therapeutic pharmaceutical agents for the treatment of systemic diseases; (B) invasive surgical procedures; (C) pharmaceutical agents administered by subdermal injection, intramuscular injection, intravenous injection, subcutaneous injection, intraocular injection or retrobulbar injection; or (D) an opioid substance or drug product.

### (2) Methods of Obtaining Certification:

Licensed Massachusetts Optometrists seeking certification, shall submit to the Board evidence of the completion of the education and examination requirement under M.G.L. c. 112, § 68C(b), as satisfactory evidence of this section.

New Applicants for licensure (initial licensure) shall fall under M.G.L. c. 112, § 68C(a). The Board will accept proof of graduation from an accredited school or college of optometry and completion of the national board examination requirements, as satisfactory evidence of this section.

#### (3) <u>Postgraduate Residency Program:</u>

Pursuant to M.G.L. c. 112, § 68C, A licensed optometrist who has completed a postgraduate residency program approved by the Accreditation Council on Optometric Education (ACOE) of the American Optometric Association may submit an affidavit to the board of registration in optometry from the licensed optometrist's residency supervisor or the director of residencies at the affiliated college of optometry attesting that the optometrist has completed an equivalent level of instruction and supervision, and the board may accept the evidence in order to satisfy any of the requirements of Section 68C. The Board will accept a completion certificate as satisfactory evidence of the requirements under Section 68C, if the licensee:

- 1) completed the postgraduate residency program in ocular disease; and,
- 2) completed the program on or after June 30, 2011.

Those completing the residency program before June 30, 2011, or did not complete the residency program in ocular disease, will be reviewed on a case-by-case basis by the Board.

#### (4) Reciprocity/Endorsement:

Applicants seeking licensure through endorsement shall fall under 246 CMR 2.01(2)(b). Additionally, pursuant to M.G.L. c 112, § 68C(c), an optometrist licensed in another jurisdiction to utilize and prescribe therapeutic pharmaceutical agents for treating glaucoma and other ocular abnormalities of the human eye and adjacent tissue may submit evidence to the Board of Registration in Optometry of equivalent didactic and supervised clinical education, and the Board may accept the evidence in order to satisfy any of the requirements of this section. The Board may accept a letter of good standing from an optometrist licensed in another jurisdiction with an equivalent scope of practice in both glaucoma and oral therapeutic agents to those of the Commonwealth, and the licensee must show that they contain such licensing authority in that jurisdiction.

#### Dual Licensure:

Licensees with a Massachusetts license and another U.S. jurisdiction may qualify for certification under a dual licensure. The Board will review these applications on a case-by-case basis. The Massachusetts licensee must have the following:

- 1. current and continuous licensure in another U.S. jurisdiction; and,
- 2. could demonstrate a substantially equivalent scope of practice in that jurisdiction

#### (5) Continuing Education:

Pursuant to M.G.L. c. 112, § 68C(e), licensees under this section whose expiration dates from January 31, 2022, and forward, must complete three hours of continuing education, which must be specific to glaucoma diagnosis, management or treatment. The three hours are inclusive of the 18 hours of continuing education requirement, pursuant to 246 CMR 2.01(3). The course must be an approved Council on Optometric Practitioner Education (C.O.P.E.) continuing education course, specifically approved by the Board under 246 CMR 2.01(3)(d), or offered by a continuing education entity under 246 CMR 2.01(3)(e).

#### (6) Mandatory Referral of Patients to Physicians or Other Qualified Providers:

(a) Pursuant to M.G.L. c. 112, § 66C, if, while examining or treating a patient with the aid of a diagnostic or therapeutic pharmaceutical agent and exercising professional

judgment and the degree of expertise, care and knowledge ordinarily possessed and exercised by optometrists under like circumstances, encounters a sign of a previously unevaluated disease that would require treatment not included in the scope of the practice of optometry, the optometrist shall refer the patient to a licensed physician or other qualified health care practitioner.

(b) If an optometrist diagnoses a patient with congenital glaucoma or if, during the course of examining, managing or treating a patient with glaucoma, the optometrist determines that surgical treatment is indicated, the optometrist shall refer the patient to a qualified health care provider for treatment.