



Connecticut Association of Optometrists

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## **Appropriations Committee Public Hearing**

Testimony of Jerry Hardison, O.D. on HB6380

Friday, March 4, 2011

Members of the committee, I am Dr. Jerry Hardison, practicing optometrist here in Hartford for the past 32 years. I am here this evening on behalf of the Connecticut Association of Optometrists. I would like to make some constructive comments regarding HB 6380 with regard to the proposed eyeglass restrictions for our adult Medicaid patients. The proposal limits each recipient to one pair of eyeglasses every 2 years while the current policy limits one pair yearly.

I suspect the proposed 2-year limit is based on fairly well recognized commercial plan standards. While many of adult Medicaid patients will manage fine with the same pair of eyeglasses for 2 years, I suggest this should not apply to all. As optometrists, we provide over 70% of the primary eye care of the adult Medicaid population. We have a keen understanding of their eye care needs given the higher incidence of diabetes, glaucoma, cataracts and mental health disease. A 2-year restriction on eyeglass replacement may, unfortunately, leave many citizens literally in a "fog." Let me give some examples:

- Patients with diabetes under poor control may exhibit marked changes in their acuity necessitating changes in their eyeglasses more often than once every 2 years.
- Patients with very high prescriptions will be rendered functionally legally blind should they lose or break their eyeglasses for any reason.

- Patients in nursing homes lose their eyeglasses often, whether it is due to personal habits or theft. For many of these patients vision is one of their remaining gifts.
- Patients who have eye surgery due to cataracts, corneal disease or trauma may require a significant change in their eyeglass correction.

Can we honestly say to these neighbors: Sorry, you are not eligible to receive another pair of eyeglasses for another year?

As you will recall, when last year's proposed budget suggested a complete cut of optometric care from Medicaid, we countered with a proposal for reform. Part of that proposal was the current one-year policy. We believe and our patients will agree that that was responsible "shared sacrifice." However, a 2-year policy could be devastating for many.

If the 2-year limit stands, we propose a well thought out plan for those patients that have a need for change prior to eligibility. Many of our current Medicaid benefits require prior authorization. Let's develop a mechanism for providers to request eyeglasses for patients with medical necessity. As the Connecticut Association of Optometrists has done in the past we are available to work with DSS to design such a system. We are willing to continue to contribute to our state's fiscal crisis but let's make sure our neediest neighbors are not overburdened. Thank you for your consideration and efforts.

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