



Connecticut Association of Optometrists

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Testimony HB6310 Equity in Vision Care  
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February 23, 2011

In 1993, the legislature passed an act attempting to preserve a patient's right to select the eyecare provider he/she wished to use. The Freedom of Choice in Eyecare Provider Act protected the patients of both optometrists and ophthalmologists from being directed by healthcare centers to a provider they didn't want to see.

Not only did the act ensure that both professions would be part of the panel, but it also assured:

1. The provider's scope wouldn't be limited to less than what is statutorily defined
2. Insurers would inform patients of the availability of both providers
3. Insurers would enroll a sufficient number of both providers to meet patients' needs

The statute has served the public well until recently. Some HMOs have chosen to exploit a loophole within the statute and circumvent its legislative intent by requiring an optometrist to join a vision plan carve-out in order to become a medical provider. This provision is placed only upon optometrists; not ophthalmologists. It is designed to discourage optometrists from participation in their plan, thus denying patients access to their provider of choice.

The Harkin Amendment to the Patient Protection and Affordable Care Act is very clear that no group health plan or health insurer will be allowed to discriminate against a group of providers based on licensure. By supporting HB6310, you will be bringing our current Freedom of Choice Act into alignment with the soon-to-be-enacted federal statutes.

Please support HB6310. It will help to preserve a patient's right to choose the eyecare provider he/she deserves.