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Testimony of Brian T. Lynch, OD
March 20, 2013
Opposing Senate Bill 1038
Public Health Committee

I am Dr. Brian T. Lynch, a practicing optometrist from Branford. My testimony represents my personal opposition as well as the Connecticut Association of Optometrists' opposition to SB 1038.

SB1038, or the Definition of Surgery Bill is not a groundbreaking proposal, nor is its true intention any less transparent than when I testified against in it 1999. The purpose of this bill is: to restrict surgical procedures to MDs, to thwart scope of practice expansions for all non-MDs, and to deny patients access to the provider of their choice. Dr. Andrew Packer, ophthalmologist, in his testimony on March 30, 1999, stated:

Because the protection, health, and well-being of the public is a responsibility of both policy makers and physicians, it should be paramount to both that surgery be defined within the medical practice act.

Dr. Packer made it very clear that the intention of the CSMS and the AMA's agenda is to restrict "surgery" to MDs only.

Over the years, I believe that the Legislative has done a responsible job in defining my scope of practice. Statutorily, it is very clear what I can and cannot do, how I do it, and what I can prescribe. I believe that competent optometrists have lived up to legislative expectations in how they have cared for their constituents, or patients. This bill is an attempt to roll back many of those privileges and deter the progress of my profession as technology advances.

Most of you think of optometry as a non-surgical profession. However, optometrists are allowed to perform "non-invasive procedures" by statute. Many of these procedures are classified as surgical procedures by insurers, generating confusion for 3rd party payers. Passage of this bill will strip away many of the clinical privileges you have seen fit to allow us to perform. Our patients have grown dependent upon us for these services. At this time of healthcare reform, and the cry for improved access to care, SB 1038 is a step in the wrong direction, now and in the future.

Currently, optometry provides 70% of all the eyecare for our Medicaid population. The majority of patients insured by commercial plans look to optometrists to meet their visual and medical eyecare needs. This bill would disrupt our patients' continuity of care and would leave our Medicaid population severely underserved.

The Definition of Surgery Bill will prevent optometrists from practicing at their present scope of practice. Our statutes are clear; we cannot perform "invasive surgical procedures," use therapeutic lasers, or open the globe. 1038 is redundant and unnecessary. I urge you to do with it what you did in 1999.