Preliminary Evaluation of the State Board of Examiners in Optometry

Recommendations: Waive from Full Evaluation

Extend Termination Date by 10 Years to July 1, 2023

Require a Follow-up Report by October 1, 2011

The Sunset Review Process

This evaluation was undertaken under the auspices of the Maryland Program Evaluation Act (§ 8-401 *et seq.* of the State Government Article), which establishes a process better known as "sunset review" because most of the agencies subject to review are also subject to termination. Since 1978, the Department of Legislative Services (DLS) has evaluated about 70 State agencies according to a rotating statutory schedule as part of sunset review. The review process begins with a preliminary evaluation conducted on behalf of the Legislative Policy Committee (LPC). Based on the preliminary evaluation, LPC decides whether to waive an agency from further (or full) evaluation. If waived, legislation to reauthorize the agency typically is enacted. Otherwise, a full evaluation typically is undertaken the following year.

The State Board of Examiners in Optometry was not scheduled for a preliminary evaluation under statute until 2010; however, DLS accelerated the review process for this board – along with several others – to more evenly distribute the number of evaluations conducted over the next few interims. The board last underwent a preliminary evaluation in 2000. Based on those findings, LPC waived the board from further evaluation. Chapter 24 of 2001 extended the board's termination date by 10 years to July 1, 2013.

In conducting this preliminary evaluation, DLS staff reviewed minutes for both open and executive session board meetings, the Maryland Optometry Act (Title 11 of the Health Occupations Article) and related regulations, prior full and preliminary sunset reviews of the board, the board complaint database for the past 10 years, licensing data, and board financial information. DLS staff conducted interviews with the board's executive director, the board president, and the government relations director of the Maryland Optometric Association (MOA). In addition, DLS staff attended open and executive session board meetings, as well as an informal disciplinary meeting.

The board reviewed a draft of this preliminary evaluation and provided the written comments attached at the end of this document as **Appendix 1**. Appropriate factual corrections and clarifications have been made throughout the document; therefore, references in board comments may not reflect the final version of the report.

The Practice of Optometry in Maryland

Maryland, along with all other states, regulates the practice of optometry. Doctors of optometry are providers of vision care. They examine patients' eyes to diagnose vision problems, such as nearsightedness or farsightedness, and test patients' depth and color perception and ability to focus and coordinate the eyes. Optometrists may prescribe eyeglasses or contact lenses and other treatments such as vision therapy or low-vision rehabilitation.

Optometrists also test for glaucoma and other eye diseases and diagnose conditions caused by systemic diseases such as diabetes and high blood pressure, referring patients to other health practitioners as needed. Optometrists may administer drugs to patients to aid in the diagnosis of vision problems and to treat eye diseases; however, the administration of drugs by optometrists in Maryland is limited in that optometrists may only prescribe topical pharmaceutical agents. Most states permit optometrists to prescribe and administer oral, as well as topical pharmaceutical, agents.

The practice of optometry differs from the practice of ophthalmology. Ophthalmologists are physicians who perform eye surgery, as well as diagnose and treat eye diseases and injuries.

The State Board of Examiners in Optometry

The optometry profession in Maryland is regulated by the State Board of Examiners in Optometry, one of 18 health occupations boards housed within the Department of Health and Mental Hygiene (DHMH). The purpose of the board is to protect the residents of Maryland in the area of eye health through the licensing and regulation of optometrists. Established in 1914, the board licenses candidates who qualify through education and examination and disciplines licensees where cause exists. The board also monitors and approves continuing education programs in Maryland.

The board is composed of seven members: five licensed optometrists and two consumers. Optometrist members must reside in and practice optometry in Maryland for five years prior to appointment. The Governor appoints the optometrist members, with the advice of the Secretary of Health and Mental Hygiene, from a list of names submitted by MOA. For each optometrist vacancy, MOA must notify all licensed optometrists in the State to solicit nominations and conduct a balloting process to select the list of names submitted to the Governor. MOA believes that this appointment process does not necessarily ensure a balanced representation of board members; however, the board has no complaints with this process as the board is currently balanced in terms of race and gender.

The term of a member is four years, and the member may not serve more than two consecutive full terms. The Governor is required, to the extent possible, to fill any vacancy on the board within 60 days. At the end of a term, a member continues to serve until a successor is appointed. The board is currently fully appointed.

The board has 2.5 authorized positions to support its activities: an executive director, a licensing coordinator, and a part-time office secretary. The office secretary position is shared with the State Board of Social Work Examiners. Other shared personnel support the board. Investigators are hired on a contractual basis and paid hourly wages by the board. An Assistant Attorney General is provided by DHMH for which the board pays its share of associated costs. A regulations coordinator and fiscal and information technology personnel are shared with other boards and paid for by each board. DHMH charges the board for certain support services, such as personnel, timekeeping, and training, through an indirect cost assessment.

Statutory Changes Affecting the Board Since the 2000 Sunset Evaluation

Several legislative changes have affected the practice of optometry and the board since the last preliminary sunset review. Major legislative changes are noted in **Exhibit 1**. Among those changes were restricting the selling and dispensing of contact lenses and expanding the scope of practice of optometry to allow therapeutically certified optometrists to administer and prescribe topical steroids.

| Exhibit 1 Major Legislative Changes Since the 2000 Sunset Review | | | | |
|--|----------------|---|--|--|
| Year | <u>Chapter</u> | <u>Change</u> | | |
| 2001 | 24 | Extends the termination date of the board by 10 years to July 1, 2013. | | |
| 2003 | 245 | Requires DHMH to adopt regulations that govern the selling and dispensing of plano and zero-powered (cosmetic) contact lenses and replacement contact lenses. | | |
| | | Prohibits a person from selling or dispensing contact lenses or replacement contact lenses without a valid and unexpired prescription or replacement contact lens prescription; violators are guilty of a misdemeanor and on conviction are subject to a fine of up to \$1,000. | | |
| 2005 | 391 | Requires licensed optometrists to successfully complete an eight-hour course in the management of topical steroids approved by the board as a condition of certification as a therapeutically certified optometrist. | | |
| | | Repeals provisions prohibiting a therapeutically certified optometrist from administering or prescribing topical steroids. | | |
| | | Requires the board, in consultation with and subject to the approval of the State Board of Physicians, to adopt a collaborative practice protocol for the administration and prescription of topical steroids by therapeutically certified optometrists. | | |

Source: Laws of Maryland

Licensing Is the Major Focus of the Board

An individual is required to have a license from the board to practice optometry in Maryland. To be granted a license, an individual must be of good moral character and at least age 18. Applicants must complete two years of pre-optometric college study in an accredited institution of higher learning or its equivalent; complete four years of study at an accredited college of optometry, a university school of optometry, or an equivalent that is endorsed by the Association of Regulatory Boards of Optometry; and pass the National Board of Examiners in Optometry examinations and a State examination given by the board.

The board requires each applicant for licensure to obtain a score of 300 on the basic science, clinical science, and patient care portions of the National Board examinations. Applicants are also required to obtain a minimum score of 75 on the board's State examination. The examination is offered online and covers State law, regulations, and scope of practice issues.

Subject to the conditions and provisions set forth in the Maryland Optometry Act, the board may waive the examination requirements for an individual who is licensed to practice optometry in another state. Students participating in a residency training program under the direct supervision of a licensed optometrist are not required to be licensed.

The licensing activity of the board for the past six fiscal years is shown in **Exhibit 2**.

Exhibit 2 Licensing Activity Fiscal 2004-2009

| <u>License</u> | FY 2004 | FY 2005 | FY 2006 | FY 2007 | FY 2008 | FY 2009 |
|----------------|----------------|----------------|----------------|----------------|----------------|----------------|
| New | 56 | 64 | 56 | 48 | 50 | 45 |
| Renewal | 50 | 708 | 39 | 715 | 37 | 639* |
| Total | 106 | 772 | 95 | 763 | 87 | 684 |

^{*}The number of renewal licenses issued in fiscal 2009 does not include 115 renewals that were instead recorded as fiscal 2010 renewals that in the past would have been recorded as fiscal 2009 renewals. Because the online renewal period ended on June 30, 2009, these renewals will be attributed to fiscal 2010.

Source: State Board of Examiners in Optometry

In addition to licensure, an optometrist may also seek certification from the board to administer diagnostic pharmaceutical agents (DPA) — medications that directly or indirectly affect the pupil of the eye or the sensitivity of the cornea — or therapeutic pharmaceutical agents (TPA) — medications used for the treatment of a disease or condition of the eye. Licensed optometrists with such certification or referred to as a diagnostically certified or therapeutically certified optometrist. Additional discussion of therapeutically certified optometrists can be found later in this report.

Number of New Licenses Issued Is Declining

In fiscal 2005, the number of new licenses issued by the board increased by 14% to a high of 64, presumably due to Chapter 391 of 2005, which expanded the scope of practice for optometrists by allowing therapeutically certified optometrists to administer and prescribe topical steroids. However, in subsequent years, the number of new licenses issued per year generally declined. The decline in new licensees is likely attributable to the relatively limited scope of practice of optometry in Maryland, which is discussed in the following section of this report. The board should continue to monitor trends in the number of new licenses issued and assess whether any action should be taken to address the decline.

The vast majority of licensees renew in odd-numbered years. The small number of renewals that are reflected in even-numbered years are late renewals that come in after the June 30 renewal deadline and the close of the board's fiscal year. The board offers a 30-day grace period for late renewals with a late fee of \$100.

Restrictive Scope of Practice May Affect the Number of Optometrists Practicing in Maryland

Since the last full sunset evaluation conducted in 1991, two pieces of legislation have affected the scope of practice for optometrists. The most significant legislation, Chapter 521 of 1995, allows licensed optometrists to administer and prescribe topical therapeutic pharmaceutical agents (TPAs). Even though optometrists receive pharmaceutical training in optometry school, Maryland was the last state to formally grant pharmaceutical authority to the profession.

Chapter 391 of 2005 was groundbreaking in Maryland because it allows a therapeutically certified optometrist to administer and prescribe topical steroids (topical steroids are now considered a TPA). Chapter 391 was also unique in that practice protocol for the administration and prescription of topical steroids by therapeutically certified optometrists required approval from the State Board of Physicians.

Maryland currently imposes the strictest regulations in the nation regarding TPAs. Chapter 521 required the board to establish a quality assurance program. The program involves a continuing study and investigation of therapeutically certified optometrists. In 1996, the board established a Quality Enhancement and Improvement (QEI) Committee. The QEI Committee reviews patient optometric records. Ten percent of TPA-certified optometrists are randomly

selected for annual peer review of TPA records. Other components of the quality assurance program include TPA self-assessment, glaucoma co-management, adverse reaction reporting, and 72-hour follow-up with patients. While the board initially found the quality assurance program to be restrictive and burdensome, the board now believes that this program allows it to be proactive in assuring the safe practice of optometry in Maryland.

Though the scope of practice of optometry has been expanded, Maryland continues to be one of the most restrictive states in the nation. Maryland, along with three other states (Florida, Massachusetts, and New York), prohibits optometrists from administering and prescribing oral pharmaceutical agents. Maryland is also the only state to prohibit or restrict the use of an Alger brush to remove foreign bodies from the eye.

The board has consistently been supportive of legislation to expand the scope of practice of optometry though it recognizes that its primary role is to protect the health and safety of consumers rather than promote the practice of optometry. Nonetheless, the board recognizes that the restrictions in Maryland may be causing a decline in new licensees. At this time, the board believes there is sufficient access to eye care through optometrists. **The board should continue to track developments in the scope of practice for optometry and their potential impact on entry into the profession in order to ensure that access to eye care in Maryland does not become a problem.**

Board Working to Repeal Obsolete Limited License

In addition to new and renewal licenses, the board is authorized to issue a limited license to individuals licensed in another state who are participating in a postgraduate teaching, research, or training program in Maryland. A limited license is valid for one year and allows the licensee to practice only at the specific institution designated on the license. The board indicates that it no longer issues such licenses and is currently working with the Assistant Attorney General and regulations coordinator to repeal statutory and regulatory language relating to this obsolete license.

Nearly All Licensees Renew Online

Licenses are renewed every two years. Licensees can complete and file the renewal form online. The board recently implemented the online renewal process with positive results. In the first year of implementation, 90% of licensees renewed online. As discussed above, the biennial renewal cycle leads to significant fluctuations in renewals, typically with fewer than 50 renewals in even-numbered years and over 700 renewals in odd-numbered years. Though to date the board has been able to handle these fluctuations administratively and, in most years, fiscally, the board is considering staggering the renewal period so that half of the optometrists are renewing their license each year. Staggering the renewal period would allow for the board to maintain more consistent revenues and spread out administrative demands on board staff.

Renewal Requirements Include 50 Hours of Continuing Education

To renew a license, optometrists that do not hold additional certification (non-certified optometrists) must complete 36 hours of continuing education each license renewal cycle. A diagnostically certified optometrist must also complete 36 hours, as well as an additional six hours relating to the use of diagnostic pharmaceutical agents. A therapeutically certified optometrist must complete 50 hours of continuing education, 30 hours of which must be in the use and management of therapeutic pharmaceutical agents. Credits completed must be submitted on the renewal application form and must be for courses that have been approved by the board. An optometrist must maintain a complete record of the credits completed along with supporting documentation. The board randomly audits 20% of renewal applications to ensure compliance with continuing education requirements.

Complaint Resolution Process Appears Fair and Adequate

The board may deny a license application or reprimand, suspend, revoke, or place on probation any licensee or holder of a limited license for a violation of any of the 27 provisions listed in the Maryland Optometry Act. Board disciplinary action can range from a letter of education to initiating formal charges against an optometrist. A monetary penalty of up to \$5,000, payable into the general fund, can also be levied by the board but is rarely imposed. When assessing the severity of penalties, the board considers willfulness, extent or potential extent of harm, investigative costs, the licensee's records, and whether the licensee received any financial gain from the violation.

Once a complaint is received by the board, the board first determines whether it has jurisdiction to investigate the complaint. If the individual is neither a licensed optometrist nor an applicant for licensure, the board may ask the Office of the Attorney General to refer the complaint for prosecution by the State's Attorney in the locality where the individual lives, provided that the individual appears to have been either practicing optometry illegally or has misrepresented himself or herself as an optometrist. In some circumstances, the board may choose to write a letter to the individual asking that he or she cease or desist from illegal activity.

If the individual is a licensed optometrist or an applicant for licensure, the board determines whether the complaint alleges that the individual committed any acts specified under § 11-313 of the Health Occupations Article. The complaint information is sent to the optometrist for a response, unless the board deems the optometrist a risk to the public. After reviewing the response, the board determines if further information is needed and refers the complaint to the board's investigator. The investigator then interviews all relevant parties, including both the complainant and the practitioner, and subpoenas all necessary records and documents.

When the investigation is complete, the investigator submits a factual report to the board. The board reviews the report to determine if there is probable cause to charge the licensee. The board may decide not to charge the individual, to informally sanction him or her, or to charge the

individual with violating the Maryland Optometry Act. If the board does charge the individual, he or she is notified of the charges and a hearing is scheduled. It is only after such a hearing that the board may take formal action against the individual. If action is taken against the optometrist, the optometrist has the right to appeal the board's decision. The board's final decision is based only on the evidence presented by both sides during the hearing procedure.

Prior to holding an evidentiary hearing, the board usually holds a case resolution conference. At this time, there is an opportunity for the optometrist and the board to settle the case by means of a consent order. In a consent order, the board and the optometrist may mutually agree on certain penalties. For example, depending upon the circumstances, an optometrist may agree to provide financial restitution, fulfill certain educational requirements, engage in supervised or limited practice, or fulfill one or more additional requirements relevant to the situation. In such cases, a formal hearing would not be held, but the optometrist would be bound by the consent order and would surrender his or her right to appeal the case.

Whether a case is settled through a formal hearing process or by consent order, adherence to the statutory and regulatory procedures normally takes several months. When a final determination is made, the board notifies the complainant and the licensee.

Board Resolves Complaints in a Timely Fashion

Exhibit 3 details the board's complaint resolution actions for the past five years. On average, the board received 56 complaints per year. However, the majority of complaints in fiscal 2006 and 2007 were initiated by the board. The board found that a significant number of the therapeutically certified optometrists were not submitting the self-assessment required under the Code of Maryland Regulations (COMAR). The board sent letters of admonishment to all licensees failing to comply with this regulation. Excluding board-initiated complaints, the number of complaints received between fiscal 2005 and 2009 averaged 21 per year.

The board appears to resolve complaints in a timely fashion. Currently, most complaints are resolved within four months of the board receiving the complaint. Since the board meets six times per year, this time frame allows for review time, referral for investigation, receipt of complainant and licensee responses, and receipt of investigative reports. In fiscal 2006 and 2007, the board-initiated complaints were resolved within two months.

Three complaints from fiscal 2008 and 2009 have not yet been resolved. A sexual misconduct case from fiscal 2008 is ongoing because of the detailed nature of the investigation. The unresolved complaints from fiscal 2009 were filed late in the year and are still under investigation.

Exhibit 3
Resolution of Complaints Received
Fiscal 2005-2009

| FY 2005 | FY 2006 | FY 2007 | FY 2008 | FY 2009 |
|---------|-------------|---|--|---|
| 15 | 92 | 119 | 26 | 27 |
| | | | | |
| 14 | 90 | 119 | 22 | 22 |
| 1 | 2 | 0 | 3 | 3 |
| 4 | 2 | 2 | 4 | 4 |
| 0 | 0 | 0 | 1 | 2 |
| | | | | |
| 9 | 5 | 20 | 6 | 9 |
| 2 | 83 | 95 | 5 | 8 |
| 2 | 4 | 4 | 13 | 7 |
| 2 | 0 | 0 | 1 | 1 |
| 0 | 0 | 0 | 0 | 0 |
| 0 | 0 | 0 | 0 | 0 |
| 0 | 0 | 0 | 0 | 0 |
| | 15 14 1 4 0 | 15 92 14 90 1 2 4 2 0 0 9 5 2 83 2 4 2 0 0 0 | 15 92 119 14 90 119 1 2 0 4 2 2 0 0 0 9 5 20 2 83 95 2 4 4 2 0 0 0 0 0 | 15 92 119 26 14 90 119 22 1 2 0 3 4 2 2 4 0 0 0 1 9 5 20 6 2 83 95 5 2 4 4 13 2 0 0 1 0 0 0 0 |

Note: A consent order is a public action, while a consent agreement is a nonpublic action.

Source: Department of Legislative Services; State Board of Examiners in Optometry

Many Complaints Dismissed or Closed; Informal Action Most Common When Issues Found

As shown in Exhibit 3, many complaints are dismissed or closed without action. Of those where the board determines that a violation has occurred, the majority are handled through informal action by the board, such as letters of admonishment or education.

Fiscal Status of the Board

The board is self-supported entirely by special funds raised through licensure fees. The majority of revenue stems from license renewal fees, which are collected every two years. Fees for new or initial licensure, the next highest source of revenue, are collected annually. Initial licensure fees are accepted upon the submission of the application. If a new license is issued at the beginning of a new license period, the license is valid for two years; if a license is issued at the mid-point of the license period, the license is valid for one year.

Board Fees Last Increased in 2003

The board charges fees for a variety of services it provides to licensees and the public. The fees range from application fees to a fee for a duplicate license. **Exhibit 4** shows the current fees. These fees went into effect in 2003 and have been charged by the board since that time.

Exhibit 4 Comparison of Board Fees Fiscal 1999 vs. Current Fees

| | Fee in 1999 | Current Fee |
|---|-------------|--------------------|
| License Fees | | |
| Application | \$300 | \$300 |
| Limited license | 100 | 100 |
| Inactive license (fee to placed on inactive status) | 250 | 250 |
| License Renewal Fees | | |
| Biennial license renewal | 500 | 600 |
| Late renewal | 100 | 100 |
| Reinstatement Fees | | |
| Reinstatement fee* | 50 | 50 |
| Reinstatement to active licensure | 100 | 100 |
| Other Fees | | |
| Second office certificate | 5 | 5 |

^{*}A licensee must also pay renewal fees for the number of years the license has lapsed.

Source: November 1999 Preliminary Evaluation of the State Board of Examiners in Optometry; Code of Maryland Regulations 10.28.07.02

Exhibit 4 also shows the changes in fees that occurred since the last preliminary sunset evaluation. The only fees that have been increased are the biennial license renewal fee and the reinstatement fee. Fees are based on budgetary projections and at this time, the board is considering increasing the biennial license renewal fee by between \$100 to \$150 in fiscal 2011, which would bring the fee to between \$700 and \$750.

Board Revenues Are Inconsistent Due to Biennial Renewal

Over the past five years, board revenues have averaged about \$280,000. However, as **Exhibit 5** demonstrates, total annual revenue fluctuates from year to year, reflective of the biennial license renewal process. For a two-year renewal period, total revenue approximates

\$500,000. The board relies on its fund balance from odd-numbered years (when the majority of licenses are renewed) to cover expenditures during even-numbered years. Expenditures for the past five years averaged approximately \$251,340 annually, ranging between \$213,505 and \$273,419. DHMH charges all health occupations boards for indirect costs such as technology support and legal counsel. Both direct and indirect costs have gradually increased over time.

Exhibit 5
Fiscal History of the State Board of Examiners in Optometry
Fiscal 2005-2010

| | | | | | | Projected |
|------------------------------|----------------|----------------|----------------|----------------|-----------|----------------|
| | FY 2005 | FY 2006 | FY 2007 | FY 2008 | FY 2009 | FY 2010 |
| | | | | | | |
| Beginning Fund Balance | \$90,113 | \$286,733 | \$120,574 | \$318,606 | \$95,756 | \$233,394 |
| Revenues Collected | 438,588 | 47,347 | 455,314 | 47,676 | 411,057 | 100,000 |
| Total Funds Available | \$528,701 | \$334,080 | \$575,888 | \$366,282 | \$506,813 | \$333,394 |
| | | | | | | |
| Total Expenditures | \$241,968 | \$213,505 | \$257,282 | \$270,526 | \$273,419 | \$276,094 |
| Direct Costs | 206,966 | 176,077 | 218,911 | 228,626 | 224,091 | 231,172 |
| Indirect Costs | 35,002 | 37,428 | 38,371 | 41,900 | 44,119 | 44,922 |
| | | | | | | |
| Ending Fund Balance | \$286,733 | \$120,574 | \$318,606 | \$95,756 | \$233,394 | \$57,300 |
| | | | | | | |
| Fund Balance as % of | 118% | 56% | 124% | 35% | 85% | 21% |
| Expenditures | | | | | | |

Note: Numbers may not sum to total due to rounding.

Source: State Board of Examiners in Optometry

Biennial Renewal Cycle Causes Fluctuations in the Fund Balance

Generally, the health occupations boards have set a target fund balance of 20% to 30% of expenditures. The fund balance protects boards from unexpected costs that may occur. As shown in Exhibit 5, the board's fund balance as a percentage of expenditures has ranged from 35% to 124%. Boards with a biennial renewal cycle, such as the State Board of Examiners in Optometry, have to maintain a higher fund balance in one year to account for limited revenues in the other year.

While the board's fund balance has met or exceeded the 30% target in past years, as seen in **Exhibit 6**, the board's projected fund balance for fiscal 2010 is \$57,300, 21% of projected

expenditures. While this is a sizeable decrease from prior years, board revenues are anticipated to increase to approximately \$420,000 in fiscal 2011 as the majority of licensees renew in odd-numbered years. Revenues may be higher as the board is considering increasing the biennial license renewal fee by between \$100 and \$150 in fiscal 2011.

Exhibit 6
State Board of Examiners in Optometry: Fund Balance Levels
Fiscal 2009 and 2010

Actual Fund Balance for Fiscal 2009

| Balance from Fiscal 2008 | \$95,756 |
|-------------------------------------|-----------|
| Revenues | 411,057 |
| Total Available Revenues | 506,813 |
| Actual Expenditures | (273,419) |
| Ending Fund Balance | \$233,394 |
| Target Fund Balance @ 30% of Budget | 82,026 |
| Excess Fund Balance | \$151,368 |

Projected Fund Balance for Fiscal 2010

| Balance from Fiscal 2009 | \$233,394 |
|------------------------------------|------------|
| Projected Revenues | 100,000 |
| Projected Total Available Revenues | 333,394 |
| Projected Expenditures | (276,094) |
| Projected Ending Fund Balance | \$57,300 |
| Target Balance @ 30% of Budget | 82,828 |
| Excess Fund Balance | (\$25,528) |

Source: State Board of Examiners in Optometry

It is unclear that this fee increase will be necessary. If the board collects \$420,000 in revenues in fiscal 2011 (a conservative estimate based on actual revenues in past years), it will have total funds available of \$477,300 for fiscal 2011. If fiscal 2011 expenditures are roughly \$303,703 (a generous 10% increase over projected expenditures for fiscal 2010, unlikely given the State's current fiscal situation), the board will end fiscal 2011 with a fund balance of \$173,597, 57% of board expenditures. The board should consider future revenue and expenditure trends going forward and determine if a fee increase may be necessary over time.

Since the board has a biennial license renewal period, it is important to consider the target fund balance over a two-year period. Exhibits 5 and 6 both indicate the extreme fluctuations in

the board's revenues and fund balances. Actual fund balances range between \$95,756 and \$318,606. As discussed earlier, the board is considering staggering the renewal period so that half of the optometrists are renewing their license each year rather than most renewing in odd-numbered years. Staggering the renewal period would allow for the board to maintain a more consistent fund balance. **The board should pursue plans to move to staggered license renewal periods.**

Recommendations

The State has an interest in licensing optometrists to protect the public from harm. Based on this preliminary evaluation, DLS finds that the board appears to perform its duties sufficiently. The board resolves complaints in a timely manner, meets its statutory obligations, efficiently issues licenses, and consistently regulates the practice of optometry in Maryland. The board was very responsive and cooperative during the evaluation process, responding quickly to requests for information. There are, however, a few issues that the board should continue to monitor or address, specifically the number of new licensees, the impact of the limited scope of practice, and the board's proposal to move to a staggered license renewal process.

Therefore, DLS recommends that LPC waive the State Board of Examiners in Optometry from full evaluation and that legislation be enacted to extend the board's termination date by 10 years to July 1, 2023. DLS also recommends that the board submit a follow-up report to the Senate Education, Health, and Environmental Affairs Committee and the House Health and Government Operations Committee by October 1, 2011, on the actions the board has taken to:

- monitor the situation regarding the decline in new licenses issued and assess whether the board should take any action to address the decline;
- track developments in the scope of practice for optometry and their potential impact on entry into the profession in order to ensure that access to eye care in Maryland does not become a problem;
- review future revenue and expenditure trends to determine if a fee increase may be necessary; and
- implement a biennial license renewal cycle to maintain a more consistent fund balance.

Appendix 1. Written Comments of the State Board of Examiners in Optometry



DHMH

Board of Examiners in Optometry

Maryland Department of Health and Mental Hygiene 4201 Patterson Avenue • Baltimore, Maryland 21215-2299

Martin O'Malley, Governor - Anthony G. Brown, Lt. Governor - John M. Colmers, Secretary

December 1, 2009

Ms. Jennifer B. Chasse Senior Policy Analyst Department of Legislative Services 90 State Circle Annapolis, MD 21401-1991

Dear Ms. Chasse:

On behalf of the Board of Examiners in Optometry ("the Board"), I want to acknowledge receipt of your exposure letter and the draft copy of the Preliminary Evaluation of the Maryland Board of Examiners in Optometry.

Under separate cover, I have provided you with factual corrections of the report. The Board and I would like to express our appreciation for the professionalism provided by Nicole Sandusky, from your office, in the performance of this assignment. We look forward to working with your department and addressing the issues that were raised and taking action on the recommendations that were made.

If your office requires additional information or needs clarification of the corrections, please contact me directly at (410) 764-5994. Thank you.

Very truly yours

Patricia G. Bennett, MSW

Administrator

Cc: Secretary John M. Colmers

Wendy Kronmiller

Karl S. Aro

Thomas Azman, O.D. Board President