Patient Bill of Rights
Several years ago, the Board adopted this document. It was posted on the Board’s website. The points are as pertinent now as they were when originally drafted. The Board encourages all licensees to not only review the document but post it conspicuously in your practice locations. Click here to review and print a copy.

2017 Online License Renewal
Licensees whose licenses expire on June 30, 2017 will receive a reminder via email from the Board about the renewal process, fees and other requirements. Therefore it is important that the Board has a current email address for all licensees. The online renewal system will be available in April 2017 and will close on June 30, 2017. Licensees can renew from July 1, 2017 through July 31, 2017 by paying an additional $100.00 late fee.

President’s Address
Four years ago I was reluctantly nominated to be a member of the Board of Examiners in Optometry. After receiving the most votes and being then appointed by Governor O’Malley I attended a new board member orientation training at UMBC. Here I learned some basics about how and why boards function. However, I don’t think I really learned about the true role of the board until this past summer when I attended the Association of Regulatory Boards annual meeting in Boston. I attended this meeting because I was elected to be the president of the board in May, and our board president and our executive director represent Maryland every year at ARBO. The speaker at this meeting that best conveyed what board members’ roles are was Dale Atkinson, the legal counsel for ARBO.

Mr. Atkinson opened his presentation with a question to all in attendance. He asked how many attendees at the meeting represented public members of their respective boards. The non-optometrist board members raised their hands. Mr. Atkinson then went on to explain that every single person in the room should have raised their hand because every member of a board is a public member whose primary responsibility is to protect the public. Public safety is the reason that regulatory boards exist. They do not exist to promote a profession or to advance the scope of a profession or to restrict competition from similar professions. Mr. Atkinson went on to state that it is helpful to have professionals on boards because they provide valuable information about the inner workings of the profession that consumer members would otherwise not know. In our
At its meeting on September 28, 2016, the Board reviewed and discussed an inquiry regarding Xiidra lifitegrast ophthalmic solution. According to the Optometry Statute, Section 11-404.2 (b) (1) "A therapeutically certified optometrist may administer and prescribe topical therapeutic pharmaceutical agents limited to: (iv) Anti-inflammatory agents. The Board has determined that Xiidra is a non-steroidal anti-inflammatory agent and therefore is within the category of permissible topical therapeutically agents. It is the Board's position that TPA certified optometrists can legally prescribe Xiidra for dry eyes.

Board Meetings

The Regular Session of Board meetings are open to the public and held at the Metro Executive Building, 4201 Patterson Ave, Baltimore, MD 21215 at 9:30 a.m. The schedule is as follows:
Wed. Jan. 25, 2017
Wed. Mar. 29, 2017
Wed. May 31, 2017
Wed. July 26, 2017
Wed. Sept. 27, 2017
Wed. Nov. 29, 2017
Licensed optometrists can attend public meetings of the Board and receive continuing education credit.

Meet the New Board Member

Xiidra

case, optometrists on the board represent the majority of the board, and board meetings can be held without consumer members present. However, I am going to stress to all of our members that we all really do represent the public, it’s just that our optometrist members are public members with professional knowledge and expertise.

Another individual who expressed what a board member's role is Bruce G. Matthews, Deputy Registrar, Ontario College of Trades. He states: "A professional or occupational regulatory board has one interest only—the public interest. It is sometimes expressed more specifically as the public welfare or public safety, but at its essence is the notion that the regulator exists so that there may be a well-ordered society in which public interest risks are mitigated and managed. This is the foundation of risk-based regulation. A regulatory body is not a club, and the interests of the practitioners do not matter."

So, one of my goals during my next three and a half years as board president is I hope to craft a concise mission statement that conveys the board's role. I want this mission statement to be on our website, in all our correspondences, and read at every board meeting to reinforce that our primary role is to protect the public.

Another goal that I would like to achieve has to do with better verifying continuing education. Presently, continuing education is the only accepted method currently used to prove continued competency of Maryland’s optometrists. The board plays a major role in assuring the public that the optometrist examining them has met the continuing education requirements spelled out in statute. The board approves many courses based on written proposals submitted to the board prior to when the CE course is given. Many offices will offer CE dinners as a way to bring ODs together to learn about the doctors who practice at that office, the services provided at that office, and in hopes that the ODs in attendance will refer patients to that office for those services. It has been learned and observed that many of the CE dinners held in this fashion do not last as long as the CE hours awarded to each lecture. Courses that the board approved for 2 hours of CE sometimes do not last one hour. Now, an OD may spend two hours at such an event, but the time spent conversing with other ODs does not count as CE. The public of Maryland deserves to be assured that ODs are actually getting the CE credit hours they need, and it will be a task that our board will strive to accomplish.

In closing, my hope is that this missive has informed the readers of what is the Board of Examiner's role and what things the board is working on as my years as president pass by. I would ask anyone who is interested in joining our regulatory board to watch for nomination and election notifications that will begin to arrive via email in the early part of 2017. I would also ask anyone who has questions for the board to feel free to contact us.

Thank you for reading, and best wishes in 2017!

Andrew Doyle, O.D., F.A.O.O.
Board President

From The Executive Director’s Desk

Board Staff, Kecia Dunham and Arthura Easter, join me in extending best wishes for a healthy, happy and prosperous New Year. We are here to serve you and
The QEI Committee Needs You

The Board is seeking to fill vacancies as soon as possible. The quality assurance program includes a record review program, TPA self-assessment surveys and other activities.

As a committee member, you will be expected to attend scheduled meetings, perform peer record reviews, draft educational topics, review adverse reaction reports and other related tasks. Committee members receive a small stipend. Please contact Kecia Dunham, Licensing Coordinator by phone at 410-764-4711 or by email kecia.dunham@maryland.gov to express your interest. The next scheduled meeting will be held on Thursday, April 27, 2017 at 4:00 p.m. at the Board Office, 4201 Patterson Avenue, Baltimore, MD 21215.

Continuing Education Credit

The Board accepts continuing education programs that are either Maryland Board approved or COPE approved. Programs are categorized as either general or therapeutic. The following COPE codes are accepted as therapeutic: GL, PO, RS, AS, PS, NO, PH, PD, SD, OP, IS, LP, SP. Review the full text support your efforts to provide the best vision care to the citizens of Maryland with the ultimate goal and interest in public protection/public welfare/public safety. The Board's theme for this year is "Changes, Challenges and Choices: Accomplishing the Board's Work".

The first change for the Board in 2017 is the formation of a new committee, which is the Executive Committee. The role, use, duties, etc. of the committee and its members have yet to be fully determined. However, it will generally provide direction and guidance to the Executive Director and staff and serve as the Board's "Think Tank". Several changes that the committee and the Board may consider will be the development of a new or revised Mission Statement, Standard Operating Procedures, New Board Member manual; the expanded use of technology and online services; planning and preparing for the Board's Sunset in 2023 et al. Under the leadership of Board President, Andrew Doyle, O.D., members have already expanded their level of participation and involvement with the use of "Slack", a communication system for teams.

Undoubtedly, as an outgrowth of these changes, Board members and staff may face some challenges as we all move to learn and enhance knowledge, skills and abilities. However, we will be equipped to make the appropriate choices to improve the efficiency and effectiveness of the Board for the future. The Board welcomes input and feedback and extends an invitation to each licensee to provide the Board with suggestions on ways to provide better customer service.

Board Member Vacancy

Applications and nominations for the Maryland Board of Examiners in Optometry are being accepted through March 7, 2017.

1 licensed optometrist which will be vacant May 31,2017.

Criteria

The criteria for members is outlined in the Board statute, Health Occupations §11-202. All Interested candidates must be licensed optometrists. Each optometrist member shall have resided in the State and practiced optometry actively and continuously in this State for at least 5 years before appointment. Terms are for four years and members may not serve more than 2 consecutive full terms.

Board member duties

- Attend six Board meetings per year which are held generally on the last Wednesday of odd numbered months, i.e. January, March, May, July, September and November. The meetings, (held at the Board office in Baltimore), begin at 9:30 and end at 12:00 noon. The meeting includes a closed and a public (open) session, and members receive a stipend of $150 per meeting plus mileage.

Board members receive documents in advance of the meeting for
of regulation, COMAR 10.28.02-Continuing Education Requirements. Listed below is a summary of the categories and maximum hours allowed in the two-year license period.

<table>
<thead>
<tr>
<th>Category</th>
<th>Hours</th>
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<tbody>
<tr>
<td>CE Prep and Delivery</td>
<td>12</td>
</tr>
<tr>
<td>Journal or Online</td>
<td>20</td>
</tr>
<tr>
<td>Post Test Clinical</td>
<td>6</td>
</tr>
<tr>
<td>Observation CPR Ethics</td>
<td>3</td>
</tr>
<tr>
<td>Practice Management</td>
<td>4</td>
</tr>
<tr>
<td>Pro Bono Work Published</td>
<td>6</td>
</tr>
<tr>
<td>Papers</td>
<td>12</td>
</tr>
<tr>
<td>Public Meeting</td>
<td>4</td>
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</tbody>
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**Discipline**

During the fiscal year 2016, the Board received (15) complaints and carried over (10) from the previous year. The Board disposed of the complaints as follows:

- Informal disciplinary action in the form of (5) Letters of Education/Letters of Admonishment;
- (9) complaints were closed due to no violation;
- (4) complaints closed administratively;
- (1) complaint referred for prosecution;
- (6) complaints are pending.

**Board's Regulations Under Review**

Throughout 2016, the Board examined its regulations to evaluate how they align with the Optometry Statute and to ensure they remain current and effective.

**Amended Regulation**

The Board's regulation that addresses civil fines was amended and became effective July 2015. COMAR 10.28.13.06 Civil Fines

A. After a hearing under Health Occupations Article, §11-315, Annotated Code of Maryland, and COMAR 10.28.04, the Board may assess a civil fine not to exceed $50,000 against a person who:

1. Practices optometry without a license in violation of Health Occupations Article, §11-501, Annotated Code of Maryland;
2. Misrepresents to the public by title, by description of services, methods, or procedures, or otherwise that the person practices optometry in violation of Health Occupations Article, §11-502, Annotated Code of Maryland; or
3. Knowingly sells or dispenses contact lenses or replacement contact lenses without a valid and unexpired prescription or replacement contact lens prescription in violation of Health Occupations Article, §11-504, Annotated Code of Maryland.

**Consumer’s Corner**
As one of two consumer members on the Board of Examiners in Optometry I have had the opportunity to learn that the Board's responsibility goes far beyond issuing and renewing licenses.

The quality of treatment and the safety of patients is the Board's primary responsibility and it meets this in several ways. In addition to verifying that persons holding themselves out to the public as being qualified to perform necessary and important eye health services are deserving of a license to practice, the Board approves and renews continuing education programs, establishes policy on numerous matters where warranted, reviews complaints, drafts legislative changes to the State Practice Act and communicates with other Boards of Examiners in Optometry in national and regional associations.

The Board works diligently to ensure patient safety while respecting and protecting the licensed optometrists of Maryland. I am both honored and proud to be a part of that effort.

Sincerely,
Rona Pepper, Consumer Member

**CLINICAL OBSERVATION**

Clinical Observation sites play an important role in ensuring that our licensees are afforded the opportunity to keep abreast of and learn various techniques regarding the maintenance of overall eye health. In order to assure that we had the most up-to-date venues for Maryland's practicing Optometrists, we revisited each location, (telephonically and through e-mail) which was previously listed and asked several Questions:

1. Whether Clinical Observation activities were still available.

2. Whether our licensees could still count on the observation experience at their location.

3. If their practice had changed in any way since they were first listed on our site, and if they minded being listed on our website.

Once that information had been obtained, the Board sent documentation to each compliant site, asking that they officially accept or reject their participation in the continued observation experiences of our licensees. If the answer was "Yes", we sent them documentation from the Board which certified them as approved Clinical Observation sites. If the answer was "No", we assured them that we would remove their particular location from our Web Page. The result of this activity was eye opening and very positive. We can now offer our licensees the ability to take advantage of Clinical Observation activities at thirty-seven locations (some businesses have more than one location), throughout the state of Maryland and at least one site in Delaware. Each are currently in operation and are ready to provide our Optometrists, the best experience possible.

Additionally, once the Clinical Observation activity has been completed, the site will verify the participation of each licensee, on the Application for Approval of Clinical Observation for Continuing Education, (found on our Website), and will send to ARBO to be documented and used for the renewal process. To access the listing of Clinical Observation sites, please go to [www.dhmh.maryland.gov/optometry](http://www.dhmh.maryland.gov/optometry).
In 1995, the vast majority of the current therapeutic statute for the practice of optometry was signed into law. An additional piece of legislation was added to the law in 2006 which expanded the scope of the statute to cover topical steroid use. The Quality Enhancement and Improvement (QEI) Committee was established after the passage of the first of those two pieces of legislation. The 1995 law had language that stated quality assurance guidelines for therapeutically certified optometrists (TPA ODs) were to be established. A specific guideline that became the responsibility of the Board of Optometry was to conduct a continuing study of TPA ODs to ensure the quality of care they provide. The QEI committee conducts this study by reviewing records of TPA ODs. So, because it is a law, twice a year a group of volunteer TPA ODs meets to discuss the records of the ODs audited. Ten percent of TPA ODs are audited yearly, and no OD can be audited more than once every four years.

If you happen to be one of the ten percent who do get audited, the following suggestions should make the auditing process easier for you and the QEI committee. First, submit only TPA related charts. If you do not see that many patients that require therapeutic agents, that is ok. But, please do not send a chart in which an OTC agent was recommended, thinking that the way you managed that case reflects how you would manage a TPA case. Next, make sure any health history questionnaire is submitted along with the record. The record's documentation of asking a proper health history is part of the review procedure. So, if the health history is gathered via a questionnaire and it is not included, the reviewer will assume that the history was not properly attained. Third, if you co-manage glaucoma, please ensure that your comanagement plan is included. If you are unaware of comanagement laws please review our statute. Finally, ensure that your records are legible. Reviewing 100-200 patient records is time-consuming enough, and is only made more daunting when it is very difficult to read the note. Switching to an electronic medical record system is certainly one way to improve the legibility of an exam note. However, please be sure to not rely on the pre-filled data or auto-fill features of many EMR's. On several occasions, the QEI committee has found notes generated with and EMR have contradicting statements. A default setting will state that no pathology existed in a particular part of the ocular anatomy, and another part of the note entered in another location states the complete opposite.

Hopefully this information will help your next audit go as smoothly as possible. The board takes its role in protecting the public very seriously. We want to be able ensure the public is receiving quality optometric care. The auditing process is just one way that we are charged with doing this. If you have any interest in joining the QEI committee, please do not hesitate to contact us, we always welcome more help.