Dear Optometry Technical Review Committee Members,

Part of my responsibility as a healthcare provider to patients is to make sure I'm able to offer various treatments to the fullest extent possible. I want my patients to be able to have the appropriate access to the most appropriate therapy for their specific needs. Part of being able to do this is for them to have access to those treatments or procedures. I'm still fairly early in my optometry career but I've had several instances where I had a patient that I recommended SLT as first-line therapy for their condition and they chose not to pursue it due to travel or convenience. I feel it is our duty as healthcare providers in Nebraska to be able to offer these kinds of services as conveniently and safely as possible. Being able to perform a procedure such as SLT in my practice would benefit my patients greatly. Thank you for your consideration.

Eric Arneson O.D. Hastings Vision Clinic Hastings, NE



To the members of the 407 Technical Review Committee:

I am writing on behalf of my patients and the patients of greater Nebraska for your consideration of the SLT procedure within the scope of optometric care. It is important to my patients and the patients of greater Nebraska, to offer treatments to fullest extent of my training. The technique that is used for this procedure, outside of the pressing the button for the laser, are techniques we use regularly in other aspects of eye care. This would allow greater access and more timely care for the treatment of diseases of the eye and adnexa. If we have received the training and certification, we should be an option for our patients as a solution to their diseases. As a second point patient's have questioned "why can I just not get that done here." Or "I do not want to have to go see someone else to get this done. Where I am located this idea of travel is not as big of a hurdle but in our rural state, patients must travel a long distance to receive this care or wait until a specific time that an OMD is present once a month to receive that care. If we can get better access in the rural parts of the state, we can reduce expenses of driving and wasted time. Thank you again for your consideration.

Sincerely.

Andrew Bateman OD Clear Vision Eye Care

570 Fallbrook Blvd ste 108

Lincoln, Ne 68521

(402) 742-0399

Drb@yourclearvision.com



To the members of the 407 Technical Review Committee,

I am writing to express the value that the SLT procedure will bring to Nebraskans and the scope of optometric care provided by optometrists across the state.

The devices and techniques used in this procedure, other than the addition of pressing a button to initiate the laser, are commonly used by optometrists and the procedure itself has been approved by multiple nearby states.

The greatest benefits will be for citizens in parts of Nebraska who have to travel many hours for treatment by an ophthalmologist or who cannot receive treatment in a timely manner because that have to wait for an ophthalmologist to come to their region. If their local optometrist can offer this service, we can reduce expenses for patients and limit wait time for those in need. Patients in larger communities will also benefit, because many do not want to re-establish care with a provider when they already have a trusted relationship with their optometrist. Often patients want to maintain consistent and continuous care with their current eye doctor. I have been asked many times, "Why can't I just get that done here?" or "Do you do that procedure?" when we have local access to ophthalmologists, a luxury not available to many people in our state.

To summarize, as a doctor, I am advocating for my patients and patients across Nebraska for more accessible healthcare. Passing this legislation to allow optometrists to perform the SLT procedure will improve treatment outcomes, provide better continuity of care, and will limit expense and appointment times for patients.

Thank you for your consideration.

Sincerely,

Breall or

Brooke Beall, OD Clear Vision Eye Care 570 Fallbrook Blvd. Ste 108 Lincoln, Nebraska 68521 (402)742-0399 DrBeall@yourclearvision.com Selective Laser Trabeculoplasty, or SLT, is a form of laser surgery that is used to lower intraocular pressure in glaucoma. It is used when eye drop medications are not lowering the eye pressure enough or are causing significant side effects to the patients. It can also be used as initial treatment in glaucoma. As an optometrist in Nebraska who has recently graduated and is trained in this specialty, it is disappointing to not be able to offer treatments to my patients that are within the extent of my training. We want to provide the best care for Nebraskans, and we want it provided for all Nebraskans - that is not happening currently. In many other states, the data shows safe, effective, use of lasers by optometrists that is able to reach many more patients much more efficiently. Nebraska optometrists just want what is best for our patients. We want to provide the most up to date treatment for our patients without the unnecessary burden on the patients to travel, establish new care with a stranger, or to wait months to be seen.

Over the past 3 years of practicing in Nebraska I have had numerous patients not elect to have an SLT performed because they did not want to establish care with a new doctor. Furthermore, many other patients denied SLTs because of the inability to get an appointment at an ophthalmologist in a timely manner, or due to extreme distance for rural patients. Nebraska optometrists just want what is best for our patients. Let us provide treatments we were trained to do to improve eye care for all Nebraskans - rural and domestic.

Derek Blumenstock, O.D. Blumenstock Family Eyecare 1501 Pine Lake Rd, Ste 1 Lincoln NE, 68512

EXCLUSIVELY EYECARE A MEMBER OF VISION SOURCE

STEVEN S. WOLFE, O.D., EA.A.O. CHRISTOPHER WOLFE, O.D., EA.A.O. LINDSEY D. BEHRENDT O.D.

To Members of the 407 Technical Review Committee:

This letter is to validate the need and justify the use of Selective Laser Trabeculoplasty (SLT) in treating glaucoma and ocular hypertensive patients. In optometry practices in rural Northeast Nebraska, patients come from the surrounding towns, driving a lengthy distance for their eye care. I have lived and worked in these remote locations. Patients with glaucoma need to be seen every few months, and there are many patients I have seen within the past couple weeks alone who would benefit from SLT. For many patients, they spend countless hours of travel for glaucoma specialists for treatment, and some even have to stay overnight due to their inability to drive at night. In addition, there are numerous time delays with trying to co-manage with an ophthalmologist. Glaucoma specialist referrals do nothing but delay care and waste time for patients who could have received an SLT at the same office that their glaucoma is already being managed for by their primary optometrist. It can be imagined how costly these unnecessary referrals and travels become and how frustrated these patients are.

As an optometrist, I am trained and certified to diagnose, manage, and treat glaucoma. The practice in which I work has invested in equipment to aid in glaucoma diagnosis and care, in order to provide my patients with the most up-to-date and technologically advanced care my profession has to offer. In addition, a minimum of 44 hours of continuing education is required every two years to keep my clinical knowledge advancing and expanding. Today, laser treatment is not a last resort for advancing and nonresponsive glaucoma, as if once was thought to be. SLT has proven results and is now considered first or second line therapy. It is unjust and wrong to refuse patients the option to receive advanced and improved treatment for their potentially blinding condition. By not allowing optometrists the opportunity to use their skills and knowledge to properly manage and treat glaucoma and ocular hypertension to the fullest extent, the result is harm to the thousands of glaucoma patients. This disservice has been a continued marked disparity of optometrists' inability to use full education, knowledge, and training to easily provide necessary and advancing treatment within clinics that are already managing all other parts of the patient's glaucoma and eye care. This is blatantly unjust and unreasonable for my patients to be deprived of this.

EXCLUSIVELY EYECARE A MEMBER OF VISION SOURCE

STEVEN S. WOLFE, O.D., EA.A.O. CHRISTOPHER WOLFE, O.D., EA.A.O. LINOSEY D. BEHRENDT O.D.

I implore the consideration of SLT, a state-of-the-art treatment option that patients are entitled to, and I as an optometrist am fully trained and qualified to administer. Without this treatment, many rural Nebraskans will continue to endure unnecessary wait, endless travels, and surmounting costs, due to the inability to receive their most appropriate and advanced therapy at their nearest optometrists office, who regularly manages their condition. On behalf of my patients and the many in the rural towns of Nebraska, I respectfully request you to thoughtfully consider advance the scope of practice for optometry. Many other states currently allow optometrists the ability to diagnose, manage, and treat glaucoma with this advanced technology and offer the vision preserving initial therapy procedure of SLT.

Humerstook, D.D.

Sincerely.

Justine Blumenstock, OD

Ariann Brown, OD

304 N 179th St, Ste 203 Omaha, NE 68118 (402) 614-4322 drbrown@viewpointevision.com

24th May 2022

To:

Members of the 407 Technical Review Committee

From: Dr. Ariann Brown - Optometrist

RE:

SLT Laser Therapy, and Access to Care

Dear members.

My name is Ariann Brown, and I am an optometrist in Omaha, NE. I am an associate doctor at ViewPointe Vision. One of the more common eye health issues we treat and manage in our clinic is glaucoma.

Eye drop medications are the most common option for patients with glaucoma, however this treatment plan requires that a patient consistently remembers to take their drops. Unfortunately, a fairly large percentage of patients become non-compliant with their drops for various reasons. I have also witnessed many patients with ocular surface disease after taking glaucoma medications over time. In those cases, a laser treatment known as SLT therapy is a great option.

Currently, SLT therapy can only be performed by an ophthalmologist in Nebraska. Which means, in most cases, referring patients to a different clinic to see a new doctor for this treatment. Depending on where patients live in Nebraska, this may involve extensive travel that can be an obstacle. Other patients, in larger cities like Omaha, do not want to make multiple appointments to see another new doctor either. That means trying to find another office, and building trust with a new provider. I experience this with some of my own patients. At times they end up skipping the referral exam altogether due to these or other factors.

In a state like Nebraska, that has a geographic shortage of ophthalmology care, it makes sense to grant optometric eye doctors the legal scope of practice to perform procedures like SLT therapy. In my own practice, it's important for me and my colleagues to offer these therapies to ensure that my patients receive the best care possible to control their glaucoma. It's truly in a patient's best interest to receive this therapy at their primary eye care provider's office, and have the continuity of care all in one place.

Lastly, it's important to note that we, as Nebraska optometry providers, acknowledge pertinent training and certification needs to be completed before providers can perform this therapy. It's also important to note that many states in the U.S. have already adopted similar training/certification programs, and have passed scope of practice legislation that allows optometrists in those states to perform these procedures. Not one case of harm, injury, or other catastrophic outcome has been reported in any of these states. To put it simply, SLT is a safe and effective treatment option for patients living with glaucoma. Please help the citizens of the great state of Nebraska with the opportunity to receive this treatment in their home communities, and with the doctor of optometry they already know and trust.

Thank you for your time and consideration.

Sincerely,

Ariann Brown, OD

ViewPointe Vision

Dear Optometry Technical Review Committee Members,

My name is Josh Conner and I am writing in support of SLT privileges for Nebraska optometrists and their patients. It is very important to my patients and to my practice to offer treatments to the fullest extent of my training In order for my patients to have access to the most appropriate therapy for their specific condition. I treat many patients with glaucoma. Very few of my patients choose SLT because they do not want to establish care from another doctor. The majority of my patents have indicated to me if they could do the SLT procedure with me they would elect to do so. I would also like to add that as an employer of optometrists I frequently find the best and brightest students are turned off from practicing in a state where they can not practice to the level they are currently being trained in school. They often choose to practice in a state that is at the forefront of scope of practice. This leads to Nebraska patients' and our communities missing out on the nation best young optometrists. By allowing Optometrists to practice to their fullest level of training we will be able to recruit the best graduates in the country and allow them to provide state of the art care to the people of Nebraska. I sincerely appreciate the time and effort it takes to serve on the TRC committee! Thank you for you time and efforts.

Sincerely,

Josh Conner O.D. Unity Eye Centers Grand island, NE

Lifetime Vision Center

Vision Source Auburn - Nebraska City (402) 274-3218 (402) 873-6696

Darren J. Wright, O.D. - Russell J. Crotty, O.D. Kyle B. Peter, O.D.



5/19/22

Attn: Members of the 407 Technical Review Committee

My name is Dr. Russell Crotty and I've been practicing optometry at Lifetime Vision Center in Auburn, NE for the past 9 years. I also serve on the Nebraska state board of health as the optometry representative. In our company's mission statement we state that we pledge to "Provide the highest quality comprehensive eyecare with respect and compassion." and to "Stay at the technological forefront of our profession." I am currently unable to practice Optometry to the fullest extent of my training. We see multiple glaucoma patients every day in our practice, many of whom could benefit from the SLT procedure as a treatment option. I was trained to perform this procedure on actual patients during Optometry school 10 years ago.

It is my professional opinion that Nebraska needs to update this law not only to save our patient's time and money, but to keep attracting the brightest graduating optometrists to return to Nebraska. If our scope of practice remains outdated, new grads will be tempted to plant roots in states which allow them to use all the skills that they were trained to utilize! This procedure is a very low risk option that our glaucoma patients would definitely benefit from and the optometrists of Nebraska are more than capable of providing with appropriate training. Whenever I refer a patient for an SLT, my patient will make a minimum of three trips to Omaha or Lincoln (Initial consult, procedure on first eye, procedure on second eye) for a total of 6.5 hours of drive time, not to mention needing to miss work each day. Thank you for taking my perspective into account and for your time spent serving on this 407 review process.

Sincerely,

Russell Crotty O.D.

VISION SOURCE



FREMONT VISION SOURCE 2955 E ELK LANE FREMONT, NE 68025 PHONE: (402) 721-8032 FAX: (402) 721-2874 DR. AMY J. DEVRIES
OPTOMETRIST

May 16, 2022

To the Members of the 407 Technical Review Committee,

I support the proposed legislative change for optometrists in Nebraska to be able to perform SLT procedures. It is important for our citizens to have access to the highest quality health care available. Currently my patients have to be referred out when I recommend an SLT to treat glaucoma. They often express concern and reluctance to have a laser procedure performed by a doctor with whom they have no established relationship.

As an optometrist in Nebraska, I am licensed to perform procedures requiring the same degree of technical skill and medical decision making as SLT. I currently determine when a patient would benefit from SLT, determine the risk factors preoperatively and manage the condition with treatment of any potential side effects postoperatively. If I had chosen to practice in Wyoming, Oklahoma, Arkansas, Kentucky, Louisiana, Mississippi, Indiana, Virginia, or Alaska I would already be performing the SLT procedure.

It is in the best interest of the people of Nebraska to allow optometrists to practice to the fullest extent of our training. This will improve access to care for our citizens and will help bring the best and brightest new doctors of optometry to our state. Thank you for your time to consider this important matter and thank you for your service to our great state.

Sincerely,

Amy J. DeVries, OD, FAAO

fry 7 1

Francisco V. Dozon, O.D.

Aksarben Eye Care
6307 Center STE 202

Omaha, NE 68106

Members of the 407 Technical Review Committee:

My name is Francisco Dozon, and I have been doing my best to take care of my patients and neighbors in the Aksarben area of Omaha, Nebraska. As a provider, it is important that patients have access to care. I have worked as an Optometrist in several settings, including providing visits in nursing homes and care facilities.

Selective Laser Trabeculoplasty (SLT) is a procedure that can save vision, as you know. It has value and sometimes is the most valuable treatment to save vision from Glaucoma in some cases. It is important to my patients and my practice to provide access to care for treatment.

Thank you for your time and consideration in this matter.

Sincerely,

Francisco Dozon, O.D.

To Members of the 407 Technical Review Committee:

This letter is to substantiate the need and justify the use of Selective Laser Trabeculoplasty (SLT) in my glaucoma patients and in my ocular hypertensive patients. I live and practice in a rural community in Northeast Nebraska. Our patients come from surrounding towns which are even more rural, many drive an hour each way to see me for their eye care. And these patients with glaucoma are needing to be seen every three to four months. I can think of three patients right off the top of my head that I have seen this month alone who would benefit from SLT. Take one of my patients who drives an hour to see me, and it would be a total of three to three and a half hours to see a glaucoma specialist for treatment. That is a half day to get there and nearly half a day to return. Many patients would need to stay overnight, as they do not drive at night, especially in unfamiliar territory and large cities. That adds to their cost and frustration. Optometrists have been trained and certified to diagnose, manage, and treat glaucoma. They have kept up with the technological advancements and invested in the expensive equipment that assists with this. We do a minimum of 44 hours of continuing education every two years. It used to be that laser was reserved as a last resort for advancing and non-responsive glaucoma. SLT is now considered first or second line therapy, and has been proven to work best this way. Is it right to refuse our patients the options of advancing treatment for their potentially blinding condition? By not allowing optometrists to continue to manage and treat our patient's glaucoma and ocular hypertension to the fullest extent, you are doing a huge disservice and actually a harm to the patients of optometrists, which is in the thousands. There is a substantial incongruity to have agreed to allow optometrists to have the training to manage and treat glaucoma but to be refused access to the latest treatments for glaucoma that we can easily offer our patients in our own clinics. That is outright unjust and unfair to our patients.

In addition, there are huge time delays when seeing an ophthalmologist. They have very busy schedules. Most glaucoma specialists decline to give us an appointment for our patient until they first review the chart. So they first request records be sent to them, review the records, and then call the patient at a later date for an appointment. This is a huge delay. Then we have to call their office back to ensure an appointment was made. Lots of extra and wasted time spent on something we could have handled ourselves.

I urge you to consider the ease of use of SLT and the state-of-the-art treatment options that our patients not only deserve but are entitled to. It is not fair to patients in rural Nebraska to not have access to the most appropriate therapy for their specific condition. Would you personally want to be offered ALL treatment options where you live or would you want to be limited because of where you live? Of course you would want to be offered all possible treatment options that are appropriate for you. On behalf of my patients in my community and the small surrounding towns, I respectfully request that you strongly and thoughtfully consider to follow suit with other states in allowing the optometrists in our state who are licensed to diagnose, manage, and treat glaucoma the ability to advance with technology and offer and treat our patients with SLT, which now has become first or second line therapy.

Sincerely,

Ann Feidler-Klein, OD



9900 Nicholas Street © Suite 250 © Omaha, NE 68114 402-493-6500 © 888-837-3937 (5vs.) © Fax: 402-493-4370

May 21, 2022

Dear Optometry Technical Review Committee Members,

My name is Will Ferguson and I have practiced optometry in Omaha since 2009. It has been a pleasure to provide my fellow Nebraskans will high level eye-care, within the limits my scope of practice allows in the state of Nebraska. Unfortunately, current Nebraska statutes limit me from practicing to my fullest potential when compared to my educational training while in school at the Southern College of Optometry in Memphis, TN.

I am writing to ask for your support in allowing the expansion of optometrist's scope of practice in the state of Nebraska. Currently optometrists are seeking authority to provide selective laser trabeculoplasty (SLT) for our patients. This procedure will significantly benefit patients who seek care in our office as it allows us to provide timely access to care to meet the needs of their specific visual conditions.

Thank you for your consideration on this matter.

Sincerely,

Will J. Ferguson, OD, FCOVD

Heartland Eye Consultants 9900 Nicholas St. STE # 250

Omaha, NE 68114 Phone: (402) 493-6500

Fax: (402) 493-4370

May 12, 2022

To members of the 407 Technical Review Committee:

I was trained and certified to do laser treatment of the anterior segment of the eye at the Dayton Veterans Administration Medical Center in 1998. For about 6 months I performed Argon Laser Trabeculoplasties, Yag Capsulotomies, Peripheral Iridectomies and laser suture lysis. Later that year I moved with my family back to Nebraska and had to give up doing laser procedures because Nebraska does not allow Nebraska ODs to do them.

All of the procedures I did were more advanced than what Nebraska optometrists are asking to do now and they were easy for me to do. All of my cases were successful with no complications. The SLT procedure that Nebraska optometrists are asking to do is the most innocuous laser procedure done by eye doctors, but will make a valuable service more available to Nebraskans, especially in rural areas. It will save patients time, money, and transportation problems, and will allow them to receive care from their trusted local doctor instead of meeting and trusting a new doctor. It will also reduce the medical treatment burden for elderly glaucoma patients who struggle with multiple drop doses per day.

SLT is far more innocuous than many medical procedures done by non-MDs in Nebraska.

I am planning to retire later this year, so this will not financially benefit me, unless I need to have it done on myself at some point. In that case I want my local eye doctor to be able to do it for me.

Thank you for your consideration.

Roger Filips OD, FAAO Hartington NE Dear Optometry Technical Review Committee Members,

I would like to take a moment to let you know why Selective Laser Trabeculoplasty (SLT) is so important to me, my practice, and my patients.

In a multi-location, rural practice, access to care is an integral part to successful patient care. For example, if we refer a patient from our Imperial office to the nearest 'home' office of an Ophthalmologist for SLT (SLT is not done at their satellite locations), it is not uncommon for the patient to wait for up to a month to even get an appointment for the procedure but also travel anywhere from two to four hours round-trip to the OMD's office.

Furthermore, consider the age of patients that need this procedure. Many times the patient is elderly and has a very difficult time instilling glaucoma drops into their eyes. These are excellent candidates for SLT but access to care in a quick and effective manner is currently lacking. One patient in need of an SLT refused to make the trip because she didn't want to 'put out my kids'. I treated her a month later for a corneal abrasion due to poking herself in the eye with the glaucoma drop bottle tip. This would have been prevented if I'd have performed SLT as a first-line treatment in my office.

SLT is a safe and effective treatment for glaucoma. Please understand how beneficial this would be for my patients in a rural location to receive this procedure without the sight-threatening consternation of a delayed referral.

Thank you for your time and service to our state.

Professionally,

Eric Gengenbach, O.D. NOA Past President First Insight Eyecare Grant - Imperial - North Platte - Ogallala May 23, 2022

To Members of the 407 Technical Review Committee,

I am writing on behalf of the citizens of Nebraska, my patients, fellow optometrists, and myself. I want to encourage you to seriously consider increasing safe, effective care for all Nebraskans, but especially those in rural areas, with the approval of the SLT procedure performed by licensed optometrists.

When I present this option to my patients, I'm often met with difficulty from the patient's standpoint. This can be a cost effective option, often resulting in better compliance, but especially on arthritic patients that have difficulty administering their drops via tiny stiff bottles. Despite the pros, the cons currently outweigh the option of SLT because of the restriction in travel. This can be due to many factors, including no driver, increased gas costs, and physical limitation of cramped, lengthy car rides.

Rural providers such as myself find it difficult for our patients to establish care in different towns or cities. It takes valuable time from my day as well as my staff's in order to secure our patient's comfort when traveling out of town. We try very hard to go the extra mile to make sure that out of town providers know our patients are traveling great distances, and to attempt to expedite their care to minimize their overnight stays, which many just cannot afford.

Living 30 minutes from Colorado, we also have patients that will choose to take their care out of our state and go into Colorado. This takes their business out of our state as well.

Finally, as a rural practitioner, I have a very close rapport with our medical practitioners in our town. We receive multiple referrals every week from local GPs for metallic corneal foreign body removal, diabetic care, and medical care of the eyes, including Shingles, Multiple Sclerosis, and high blood pressure, among multiple other conditions. Not only do our patients trust us to care for their overall health and ocular wellness, but our local medical doctors do as well.

I appreciate greatly your time invested in this careful consideration of approval of SLT. As a medical provider, my job is to first do no harm, and to provide the very best care for my patients within my scope of practice. This procedure falls within those parameters, and I am pleading with you, for the sake of your fellow Nebraskans, to approve this SLT procedure.

Sincerely,

Victoria Gengenbach, O.D. First Insight Eyecare Grant, Imperial, Ogallala, North Platte 5/3/22

Dr. Chad Hudnall

Unity Eye Centers-Grand Island

To: Members of the Optometry Technical Review Committee

I am writing in support of the SLT procedure as part of the Nebraska Optometric Association's 407 TRC application. This is a very important procedure to my patients and our practices across central Nebraska. We have locations in Grand Island, St. Paul, Columbus, Norfolk and Pierce. This procedure is important as it allows me to utilize the fullest extent of my training and allows my patients the access to care for the most appropriate therapy for their condition. Access to care continues to be an issue, and as an optometrist, I am trained to diagnose and treat many conditions, including those that this procedure would be beneficial for. I currently have patients that have to travel for this procedure, and due to not wanting to miss work and establish care with another provider, they have not been able to have this procedure.

I appreciate you serving on this committee, as I know it takes time away from your job and family.

Chad Hudnall
Optometrist and Partner at Unity Eye Centers



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feidlereyeclinic.com

Jeff Klein, O.D. Optometrist

Ann Feidler-Klein, O.D. Optometrist

> Jackson Kube, O.D. Optometrist

Herbert Feidler, M.D. Eye Surgeon & Physician

William Miles, M.D. Eye Surgeon & Physician

May 13, 2022

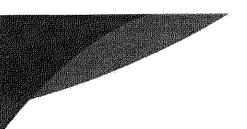
Dear Members of the 407 Technical Review Committee,

I'm an optometrist in Norfolk and wanted to educate you on the challenges we face for our glaucoma patients. While, Norfolk is not a small town for Nebraska, we still face challenges to get timely and quality care for our patients who we have to refer to a glaucoma specialist (ophthalmologist). This is often for procedures we have been trained for and are capable of doing. Selective Laser Trabeculoplasty (SLT) is one of those procedure and one that you are currently evaluating in the 407 process.

In Norfolk, many of our patients come from smaller towns surrounding us. Many travel an hour or more just to get to us. We actually have patients that come from as far west as Burwell, Ainsworth and Valentine, which is a 2-3 hour drive each way. Trips to the doctor can be a challenge for these patients and often times they neglect their care because of the long distances they have to travel. Then, if you add an extra 2 hours to their drive to go to Omaha or Lincoln, where the glaucoma specialists are, just to receive a procedure that could easily be done in our office, it becomes quite a burden. Many patients don't want to make that extra trip and it's not uncommon that they delay additional, beneficial care because of it.

Here's how a referral to a glaucoma specialist goes in our practice. First of all, the nearest glaucoma specialist is 2 hours away in either Omaha or Lincoln. When we determine that a patient needs a procedure like an SLT, we call their office to schedule an appointment. Because these offices are already overwhelmed with patients, they will not schedule the patient right away, despite any urgent need. We have to send records first for the ophthalmologist to review. The majority of the time it takes several days to a week or two before they even review the records. Then they have their staff call the patient to schedule the appointment which often times is an additional 2-3 month wait before they can even see the patient. Meanwhile, the patient's eye pressure is still elevated and they are potentially experiencing permanent vision loss. This delay is detrimental to our patient's vision and ocular health, and is totally unnecessary if I was allowed to practice to the fullest extent of my capabilities and training.

SLT is one procedure for my glaucoma patients that, as an optometrist, I am fully trained to do and could easily do in my office. While topical medications are commonly used, they can provide challenges for patients to use. The more drops that need to be used, the more toxic it becomes to the surface of the eye and the more compliance decreases. This puts the patient at risk for potential permanent loss of sight. SLT provides an option to decrease the pressure in the eye, minimizing or eliminating the need for expensive topical medications and helping to preserve their vision. It has become more of a first- or second-line treatment and one that would be very beneficial for my patients if I could perform them in my office.





"Dedicated to preserving the gift of sight."

feidlerevectinic.com

Jeff Klein, O.D. Optometrist

Ann Feldler-Klein, O.D. Optometrist

Jackson Kube, O.D. Optometrist

Herbert Feidler, M.D. Eye Surgeon & Physician

> William Miles, M.D. Eye Surgeon & Physician

It is very important to my patients and to my practice to offer treatments to the fullest extent of my training. As primary care optometric physicians, providing these services in our rural offices can help decrease the cost of healthcare for our patients and provide improved and more timely care. My patients need access to the most appropriate treatment for their specific condition. With our current optometric scope laws, we are limited. Several states currently allow optometrists to safely and effectively perform this procedure. Nebraska should be leading the way for allowing optometrists to practice at the fullest extent of their training, not lagging behind other states.

I respectfully encourage you to consider the needs of the people of the state of Nebraska and support approval of allowing optometrists to perform SLTs on our glaucoma patients. Hopefully I've shown that this will improve quality of care in a timelier manner, decrease the healthcare and travel costs for our patients, and help preserve the precious gift of sight.

Thank you for the time you have spent on the 407 Technical Review Committee and for considering my request.

Sincerely,

Jeff Klein, O.D.

Matthew F Klemke, OD

304 N 179th St, Ste 203 Omaha, NE 68118 (402) 614-4322 drklemke@viewpointevision.com

13th May 2022

To: Members of the 407 Technical Review Committee

From: Dr. Matthew Klemke - Optometrist

RE: SLT Laser Therapy, and Access to Care

Dear members,

My name is Matt Klemke, and I am an optometrist in Omaha, NE. I own a practice called ViewPointe Vision, where my associate doctors and I treat thousands of patients each year for a variety of eye and vision problems. One of the eye health issues we treat and manage for hundreds of our patients is glaucoma. I actually really enjoy treating these patients as there are many options to offer them regarding their treatment plans, and if managed closely and carefully, these patients' prognosis is usually very good, with only limited or actually no functional vision loss if they are treated early in the disease process.

Eye drop medications are the most common option for patients with glaucoma, however this treatment plan requires that a patient consistently remembers to take their drops. Unfortunately, a fairly large percentage of patients either forget to consistently take their meds, or they may have side effects (eye irritation, etc) from their meds, and consciously choose not to take them. In those cases, a laser treatment known as SLT therapy is a great option.

Currently, SLT therapy can only be performed by an ophthalmologist in Nebraska. Which means, in most cases, referring patients to a different clinic to see a new doctor for this treatment. Depending on where patients live in Nebraska, this may involve extensive travel that can be an obstacle. Other patients in larger cities like Omaha also don't want to go see another new doctor either. That means trying to find another office, and building trust with a new provider. I experience this with some of my own patients. At times they end up skipping the referral exam altogether due to these or other factors.

In a state like Nebraska, that has a geographic shortage of ophthalmology care, it makes sense to grant optometric eye doctors the legal scope of

practice to perform procedures like SLT therapy. In my own practice, it's important for me and my colleagues to offer these therapies to ensure that my patients receive the best care possible to control their glaucoma. It's truly in a patient's best interest to receive this therapy at their primary eye care provider's office, and avoid some of the common obstacles to receiving this care.

Lastly, it's important to note that we, as Nebraska optometry providers, acknowledge pertinent training and certification needs to be completed before providers can perform this therapy. It's also important to note that many states in the U.S. have already adopted similar training/certification programs, and have passed scope of practice legislation that allows optometrists in those states to perform these procedures. Not one case of harm, injury, or other catastrophic outcome has been reported in any of these states. To put it simply, SLT is a safe and effective treatment option for patients living with glaucoma. Please help the citizens of the great state of Nebraska the opportunity to receive this treatment in their home communities, and with the doctor of optometry they already know and trust.

Thank-you for your time and consideration.

Sincerely,

Matthew F. Klemke. OD

President / Owner - ViewPointe Vision

with F. Khh, O.N

William Kusek

Eyecare Professionals 420 N Diers Ave Grand Island, NE 68803

25th May, 2022

Dear Optometry Technical Review Committee Members,

I am writing to you regarding the benefits my patients would experience if I were able to perform selective laser trabeculoplasty (SLT) in Nebraska. SLT is a skill I was taught while attending the Illinois College of Optometry. Performing SLT as an optometrist would allow me to practice to the fullest extent of my education. For some patients, SLT is the ideal treatment for their glaucoma diagnosis. In the past year, I have had several patients who would have benefited from SLT, but declined as they did not want to establish care with another provider in order to receive the treatment. Additional deterrents for patients included additional travel as well as unnecessarily repeated tests.

During a recent exam with a glaucoma patient, I observed progression of her disease despite compliance with her current pressure-reducing eye drops. My patient had also been showing signs of early dementia, and I was worried that adding another eye drop to what she was taking would cause confusion and result in poor compliance with her treatment. Rather than performing SLT in-house, I had to refer her to a provider in Omaha for an evaluation to perform SLT. A family member of the patient had to take off work in order to bring her to the appointment. If Nebraska optometrists were able to perform SLT, a component of modern optometric education, it would have saved the patient and her family time and money.

I firmly believe allowing optometrists to perform SLT would benefit my patients and patients around the state. This procedure is safe, effective, and well within the capabilities of Nebraska's optometrists.

Thank you for your time and consideration on this issue.

William Kusek O.D.

To the Members of the 407 Technical Review Committee:

I am in favor of allowing optometrists to be able to perform laser procedures, such as a SLT. I practice in a very rural setting and it usually takes 2-3 months to get patients in to see an ophthalmologist who is an hour or more away. Most patients that need additional treatment from an ophthalmologist are elderly and it is not easy for them to drive. This leaves them to depend on family members or sometimes friends to get the additional help they need.

As an optometrist, especially one who was trained at Northeastern State University Oklahoma College of Optometry I am fully capable and trained to be able to provide some of these services patients are needing, such as an SLT without having to travel or wait months to get into an ophthalmologist.

I appreciate you taking the time to read this.

Sincerely Kelly McLain, O.D. To the Members of the 407 Technical Review Committee:

I am writing regarding expanding the scope of optometric practice to include performance of SLTs. Due to the conclusions of extensive studies, SLT is becoming a first line treatment for glaucoma, and therefore needs to be easily accessible to our patients. Particularly, for patients who may be non-compliant with drop therapy or for whom drop therapy causes adverse reactions, SLT is a necessary treatment.

Having access to this treatment is important to my patients, and for myself to be able to offer this treatment allows me to practice to the fullest extent of my training. I attended optometry school in Oklahoma where this procedure is included in optometry's scope and is regularly performed. I was trained to perform this procedure, and currently am unable to offer it to my patients. My patients then have to travel and establish care with another provider, which often, particularly my elderly patients, do not want to do. Patients deserve to have access to the most appropriate therapy for them, and particularly in more rural areas of the state, this procedure is not easily accessed at this time. I ask that you please strongly consider the importance of this procedure becoming part of optometry's scope of practice to more effectively serve patients in the state of Nebraska.

Thank you for your time and consideration.

Nicole Morrissey, O.D.

Lifetime Vision Center

922 Alden Drive Auburn, NE 68305 (402) 274-3218 121 N 8th St Nebraska City, NE 68410 (402) 873-6696

Kyle B Peter, O.D. Darren J. Wright, O.D. Russell J. Crotty, O.D.



Dear Members of the 407 Technical Review Committee,

My name is Dr. Kyle Peter and I practice in Nebraska City, Nebraska. I grew up in Lincoln but my professional journey led me to a rural practice and I couldn't be happier. Practicing in a rural setting often allows me to practice to my fullest scope. I specifically chose to receive my optometric education at Northeastern State University in Oklahoma because Oklahoma and Northeastern state had the largest scope of practice for Optometrists. This allowed me to receive the most comprehensive education, including laser procedures such as the SLT, that I could bring back to my home state of Nebraska. It is important to me that my education does not go to waste and my patients are allowed the option of the most appropriate therapy for their condition without adding an increased burden to their schedule or the healthcare system. I manage a large number of patients with glaucoma because they trust my care and sometimes need local healthcare options. I have had patients that likely would have benefitted from the SLT procedure in my office but didn't want to make the extra trip or did not make it to the referral for one reason or another. Please allow your home grown talented optometric physicians provide the best quality of care to all parts of the state by passing this bill.

Thank you for your consideration,

My BPwoD.

Dr. Kyle Peter

Vision Source

19060 Q Street, Suite **107** • Omaha, NE 68135 (402) 807-3937 • www.moderneyesomaha.com

May 24, 2022

To: Optometry Technical Review Committee Members

RE: SLT procedures

Hello Optometry Technical Review Committee Members,

My name is Kristin Reed, OD, FAAO, and I own a private practice in Omaha, Nebraska. I am writing to you to request your support for allowing optometrists licensed in Nebraska to perform selective laser trabeculoplasty (SLT) in our state. Optometrists are well-equipped and trained to manage a large proportion of glaucoma cases, and SLT would be another way for us to help preserve our patients' vision, particularly when they are unable to instill drops themselves or are not responding to pharmaceutical interventions as well as needed to maintain vision and intraocular pressures. This procedure is straightforward to learn and some optometry schools are already providing training to optometry students. Allowing optometrists licensed in Nebraska to perform this procedure and to practice closer to the full scope of training they receive in their respective Doctor of Optometry programs would attract quality optometrists to Nebraska, especially those who were born and raised here. Additionally, SLT is performed by optometrists licensed in other states, so it has a proven track record of being safe for our patients.

I am fortunate to practice in Omaha and can refer my patients for SLT procedure as needed. However, many of my patients would prefer to continue their care with me in my office and are disappointed when I need to have them establish care at another office, wait for communication from that office, and go between multiple locations when it is a procedure that I would be very capable of safely performing in my office. As you already know, Omaha and Lincoln generally have access to referral centers that are reasonably close for our patients, but that is not the case when a patient lives very far off the Interstate 80 corridor. Our patients trust us to best care for their eyes and I cannot think of any optometrist I know who would perform a procedure who isn't adequately trained or comfortable doing certain procedures. Allowing optometrists licensed in Nebraska to perform SLT procedures would enhance the outcomes of controlling pressures in glaucoma and preserving vision for our patients.

Kindest Regards,

Kristin Reed, OD, FAAO Owner & Optometrist

Mistro A Pred

ModernEyes Eyecare & Eyewear, PC

Dear Optometry Technical Review Committee Members,

Your work on this technical review is greatly appreciated. I know you've probably received numerous letters regarding selective laser trabeculoplasty (SLT); I'll try to keep mine short and to the point.

I practice in Wayne, Nebraska. We are a thriving, growing community. My optometric colleagues and myself provide the only eye care within a 45 minute drive. I am consistently amazed how often this distance separates my patients from important, straightforward medical eye care—especially SLT for glaucoma.

For one of my patients, this meant delaying care. He has long struggled with remembering to put in glaucoma drops, which has resulted in progression of his glaucoma. However, he does not have any family support, and has lost his driver's license due to his vision. I recommended SLT every six months for over FOUR years before he could get a community member to provide him transportation and support. He came to my office over eight different times—any of which I could have performed SLT and helped treat his glaucoma if state law allowed.

I urge your consideration and appreciate your commitment to improving access to quality medical eye care in Nebraska.

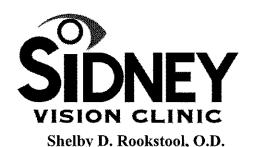
Sincerely,

Scott Ronhovde, OD

1 selle

Magnuson Hopkins EyeCare, PC

Wayne, NE 68787



Wednesday, May 25, 2022

Dear Optometry Technical Review Committee Members,

I am a recent graduate (class of 2019) and I was trained on the proper and appropriate use of lasers for the management of ocular conditions. I learned how to perform YAG capsulotomies for posterior capsular opacification ("secondary cataracts") and SLT/ALT for glaucoma management.

My practice is located in the panhandle of Nebraska and the nearest ophthalmology clinic is 1 hour away. That clinic services several other rural communities and is typically booked out 1-2 months. I have several patients who have reached max medical therapy and would benefit from a change in treatment. Just this morning I had a patient encounter and she has been on 3 different drops and is currently on two drops. Her intraocular pressure is not at target for acceptable lowering as she is sitting around 28 mmHg in the worse eye. She is not currently scheduled for an SLT as her husband is undergoing health conditions of his own and is restricting their travel.

If optometrists were able to provide laser services, these patients would have more access to care. We can meet these patients where they are at in their life without access to care being a restriction.

Thank you for the opportunity to discuss expanding optometry's scope of practice.

Dr. Shelby Rookstool Doctor of Optometry My Family Vision Clinic D.B.A. Sidney Vision Clinic Sidney, NE 69162

900 Pine St.
Sidney, NE 69162
PHONE: 308.254.4041
TOLLFREE: 888.206.4138
FAX: 308.254.3718
EMAIL: sidneyvisionclinic@gmail.com



FREMONT VISION SOURCE 2955 E ELK LANE FREMONT, NE 68025 PHONE: (402) 721-8032 FAX: (402) 721-2874 DR. LAURA M. SCHINDLER OPTOMETRIST

05/19/2022

Dear Members of the 407 Technical Review Committee:

I am writing in support of the proposed legislation to allow optometrists to perform SLTs in Nebraska.

It is important for patients in my practice to have access to the appropriate treatments for their ocular conditions. As an optometrist in Nebraska, I currently monitor and treat patients with glaucoma. I also make the decision as to when a patient would benefit from or require surgeries relating to their glaucoma. However, patients who would benefit from an SLT for glaucoma are many times hesitant to be referred to another provider who they have not established a long-term relationship with. Patients often tend to decline the referral when they realize the procedure cannot be performed in my office.

Currently, optometrists in Nebraska perform many other ocular procedures safely in the office.

Optometrists in several other states have been safely performing SLT procedures for years.

Furthermore, many patients in rural areas of Nebraska do not have access within a reasonable travel distance to obtain these ocular procedures and post op appointments. Please consider this legislative proposal to be a safe and beneficial change for Nebraskans. Thank you for your support.

Sincerely,

Laura M. Schindler, OD, FAAO



May 26, 2022

Dear Optometry Technical Review Committee Members,

Hello, my name is Faith Schneider, and I practice optometry in York and Central City, Nebraska. Between the two practice locations, my partners and I have a little over 1,300 patients that have been diagnosed with glaucoma, ocular hypertension, or being followed as a glaucoma suspect. Many of these individuals are using therapeutic drops to manage their diagnoses. However, as technology continues to advance, newer treatments that are simpler, less confusing and more efficient are available as first-line defenses for our rural Nebraskans. As a practitioner, I would love to bring these treatment options to my fellow rural Nebraskans and am writing to you today in hopes of progressing the care optometrists can provide to the individuals we help serve every day.

The treatment option of Selective Laser Trabeculoplasty (SLT) is a first-line treatment for glaucoma and ocular hypertension, and many of our patients would benefit from this form of treatment. In the selective laser trabeculoplasty versus eye drops for first-line treatment of ocular hypertension and glaucoma (LiGHT) study funded by the National Institute for Health Research and the Health and Technology Assessment Programme, it was determined that SLT should be offered as a first-line treatment for open angle glaucoma and ocular hypertension, and supports a change in clinical practice due to the laser treatment being more effective in controlling glaucoma and being more cost effective over time compared to eye drops.

While being trained on SLT procedure during my studies at The University of Missouri-St. Louis, School of Optometry, I am not able to provide this service to my patients at this time due the legislation in our state. My patients should be able to be offered the treatments to the fullest extent of my training from optometry school, instead of being denied these opportunities, causing them increased waste of time and finances. Providing the best care and offering the best treatments is important in how I can help take care of my fellow Nebraskans.

Sincerely,

Faith Ann Schneider, OD, FAAO

9900 Nicholas Street, Suite 250 Omaha, NE 68114 Phone: 402-493-6500 Fax: 402-493-4370

May 20th, 2022

Dear Optometry Technical Review Committee Members:

I am writing in support of the proposed scope of practice enhancement to allow optometrists to perform selective laser trabeculoplasty (SLT) in Nebraska. This scope will allow optometrists to perform more in line with the current education and training that we currently receive in optometry school and training after. Many States already have authorized SLT for optometry and have increased access to care for many patients in those States. This includes my home state of Wyoming where I can perform SLT once crossing the border of Nebraska.

Even practicing in Omaha, when educating a patient about this glaucoma treatment which could help them preserve vision longer and have less side effects than eye drops, patients elect not to go forward because I have to refer out to another Doctor (Ophthalmology) for this treatment. In many cases, when referred to an ophthalmology practice, these patients will see another optometrist for the initial evaluation and receive the treatment from the ophthalmologist without even being evaluated by the ophthalmologist first. This supports the fact that we are fully trained to assess who is a good and poor candidate for this treatment and that ophthalmology trusts that opinion.

I would ask the committee to please support this increased scope of practice for optometry. Thank you all for your service and what you do for the State of Nebraska.

Holly Ternus, OD

Heartland Eye Consultants

Omaha, NE

To: Members of the 407 Technical Review Committee

From: Alex Tharman, O.D.

Re: SLT therapy and access to care

Hello committee members.

My name is Alex Tharman, and I am an optometrist practicing in Omaha, NE. I am one of four optometrists working in a local private practice called ViewPointe Vision. We care for thousands of patients a year each with their own unique eye conditions ranging from updating their prescriptions at their comprehensive exam to managing numerous complicated issues and diseases. One of these conditions is glaucoma, the second leading cause of blindness in the world. Even though this disease touts such a title, patients suffering from glaucoma can actually have a very good prognosis if they are caught and treated early and properly. Treatments for these patients can range from monitoring frequently, to daily eye drops, to minor procedures or surgeries.

SLT, or selective laser trabeculoplasty, is a therapy that is becoming more highly recommended as doctors become more familiar with it, its availability increases, and it continues to show years and years of benefit. Treatments such as SLT also allow the patient to be caring for their condition without complicating or adding tasks to their daily lives and routines. As far as the state of Nebraska is concerned, there are a number of rural areas and pockets of the state where access to this therapy is greatly reduced and may require traveling hours to a provider offering this service. I'm no stranger to this myself coming from a rural town in north-central Kansas where a good number of people journey 4 and a half hours or more to Omaha in order to seek care from specialists in their respective fields. This journey can be a heavy load for some people and some may just be more comfortable having the procedure performed by someone they've already built a doctor-patient relationship with and trust.

Myself and other eye care providers want the very best for our patients. SLT has been shown to be a safe and effective treatment in the realm of glaucoma management. Having recently graduated from optometry school myself in Indiana, I was exposed to this treatment during my clinical rotations as well as performing this procedure in our lab courses. I have seen firsthand the effectiveness of the therapy and understand the benefits that can be provided by allowing optometrists in the state of Nebraska to perform SLT as long as imperative training and certification has been completed.

Please strongly consider allowing primary care optometrists in the state of Nebraska to be allowed to perform SLT therapy and continue to provide the best treatments available to their trusting patients.

Sincerely,

Alex Tharman, O.D.

Alex Thomas OD

Dear Members of the Technical Review Committee,

I am writing to discuss the Nebraska Optometric Association's work to expand our scope of practice as it relates to the SLT laser.

This is important to my patients and me for multiple reasons. The SLT laser has been proven to be a primary and secondary treatment option for patients with glaucoma. This procedure has a small side effect profile in contrast to topical medications which can cause irritation and other side effects when used chronically.

Nebraska optometrists have been treating glaucoma since 1998 with no board actions indicating inappropriate care. SLTs have been performed since 1995, meaning optometrists have been recommending this procedure and performing the peri-operative care of this procedure for 24 years. Optometrists currently perform all of the technical skills required for the procedure except for the discharge of the laser.

When it comes to my patients, it can be difficult and inconvenient to get them this treatment when indicated. Often, they have to travel close to one hour to establish care with another provider who then repeats testing that has already been performed for that patient. This would allow me to provide this treatment to my patients more efficiently. This would save my patients time, money and spare them from the side effects that topical medications can cause.

I graduated from optometry school in 2021 and have been trained to perform this treatment. Currently, optometrists are performing this treatment in 7 other states. Many of my classmates have decided which state they would practice in based on the ability to perform the SLT treatment along with other treatments optometrists are unable to perform in Nebraska.

Expanding scope to include performance of the SLT will improve access to care for patients across Nebraska, and will help Nebraska retain its professionals that go out of state to obtain their optometric education.

Thank you for considering our proposal.

Alec Waters O.D.

Members of the 407 Technical Review Committee:

Expanding the scope of practice for optometrists in Nebraska is a topic that is very important to me. Especially in Western Nebraska we have many people that have limited access to glaucoma specialists. Allowing us to practice and offer treatments to the fullest extent of my training would help make sure that our patients have access to the most appropriate care for their conditions.

Sincerely,

Jason Webb OD Scottsbluff, NE Dear Optometry Technical Review Committee Members,

I am writing on behalf of the patients that my fellow optometrists and I serve across the great state of Nebraska. Selective laser trabeculoplasty (SLT) is becoming a standard first- and second-line glaucoma treatment option. As the primary eye care providers in the state, optometrists are currently diagnosing and treating glaucoma every day in our practices. Our patients trust the care they receive and prefer the convenience of staying close to home to be treated.

I practice in a large optometry and ophthalmology practice in Omaha. I see the need for SLT care in my office on a regular basis. Compliance with glaucoma medications decreases considerably as more medications are needed to lower intraocular pressure. Some patients have difficulty instilling drops in their eyes due to conditions such as tremors, have an apprehension of using eye drops, or just forget to use them at times. The patients I see on a daily basis trust the care I provide them, and even when SLT is their best option, they often decline the referral in fear of having to establish care with a new provider. Our practice has an SLT laser, but referral to an ophthalmologist within my own practice causes the patient additional expenses for repeat consultation exams and additional time away from work. In addition, these repeat visits cause a larger drain on the healthcare system for a treatment that I could have provided, without the need for a referral.

The patients of Nebraska have the right to the most appropriate therapy for their condition. There are many rural communities across the state that do not have easy access to care from an ophthalmologist. Growing up in O'Neill, I know that access to this kind of care was several hours away. I spent four months as an intern in O'Neill and saw the trust that these patients had in their optometrist. If the procedure could not be performed locally, these patients declined care. They feared changing providers and could not justify the increased time away from home and increased cost associated with travel and additional appointments. Knowing that their eyes may be at risk, they declined treatment for a procedure that could have easily been performed by their local optometrist.

Optometry students across the country are being taught these skills. I performed this procedure as a resident optometrist in 2011. I had to take a step back in my training after moving back to Nebraska upon completion of my residency. The state of Nebraska is at risk of losing great healthcare providers to different states where they can practice to the fullest scope of their education. But the people that suffer the most are our patients that put their eyesight at risk by foregoing this procedure. Please help them by supporting this advancement in optometric scope of practice.

Sincerely,

Matthew L. Willis, O.D. Midwest Eye Care, P.C. Omaha, NE 68046

Lifetime Vision Center

Vision Source Auburn - Nebraska City (402) 274-3218 (402) 873-6696

Darren J. Wright, O.D. - Russell J. Crotty, O.D. Kyle B. Peter, O.D.



May 26, 2022

Attn: Members for the 407 Technical Review Committee:

My name is Dr. Darren Wright and I've been practicing optometry at Lifetime Vision Center in Auburn, NE for 27 years. I am a past president of the Nebraska Optometric Association and North Central States Optometric Council. My practice has a Mission Statement that includes pledging to practice "at the technological forefront of our profession". That pledge is hard to do when you practice in a state where doing SLT glaucoma procedures is against the law for optometrists. I see and treat glaucoma patients in my practice every day. Denying my patients access to my ability to safely do a procedure that optometrists in many other states have been safely doing for years, some decades, is bad for patients' healthcare, bad for patients' healthcare costs and bad for attracting the best doctors to Nebraska.

My patients need local access to SLTs. Currently, if a patient of mine needs an SLT procedure, they have to travel to Omaha or Lincoln a minimum of 3 round trips. That's 3 days off of work for them and their driver, well over 6 hours of drive time and expensive visits with a specialist they may have never met. All that excess cost is avoidable, if I could perform the SLT in my office. My patients know me, trust me and would invariable prefer that I do the procedure.

This lack of rural access to SLTs causes patient outcomes and quality of life to be compromised. Because of the aforementioned inconvenience, cost, and establishing trust with a new doctor, many of my patients hear their options and choose a less desirable option for treatment. Lack of access makes a significant difference health care...and not in a good way.

Preventing sharp optometry school graduates from performing important procedures that they learned in school has a strong negative effect on attracting the best doctors to Nebraska. New graduates are now expecting to practice at the highest level of their education. As more and more states in the Midwest update their laws to allow this, I fear that getting a new doctor to move to Nebraska, with its antiquated and restrictive optometry law, will continue to get more difficult.

I strongly believe that modernizing Nebraska law to allow optometrists to do SLT will be safe, cost-effective, beneficial to my patients, and will attract the best and brightest doctors to practice in our beloved state of Nebraska.

I appreciate your time to consider my opinion and all the time you are taking to serve on the 407 Technical Review Committee.

Sincerely,

Darren J. Wright, O.D.

VISION SOURCE