



*Affiliated with the American Optometric Association*

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March 3, 2021

Dear House Health Policy Committee Members,

The Michigan Optometric Association [MOA] writes in opposition to House Bill 4356 (Meerman) as introduced. In its current form, it **provides no quality-of-care protections**, encourages **decreased access to preventative and ongoing care**, and will **increase cost of care** for many patients.

There are **no patient protections outlined in this bill**. Although some contact lens sales companies institute internal protections (age restrictions, proof of exam requirements, health condition disqualifications), the bill language does not require of any of these protections. A company, at any time, could alter their internal standards or eliminate care standards altogether.

The bill allows for “examination and evaluation. . . through telemedicine,” which **opens the door to companies offering remote “exams” to unsuspecting and unknowing patients**. Contact lens sales companies offer vision acuity and eye screenings but not any type of actual eye exam. The optometrist-recommended average time for follow up comprehensive examinations is 1-2 years; these unchecked, remote prescriptions in perpetuity, using only the virtual vision screenings are dangerous to patient health and risk long-term health complications. A virtual screening for contact lens is beneficial in some ways, but this certainly does not belong in the “examination” area of the law.

**This policy will increase long term healthcare costs by limiting ongoing and preventive care.**

With no timeframe requirements in the bill, a patient could go years and years without proper, medical exam follow ups. Regular comprehensive eye exams help evaluate ongoing vision and eye health, catching concerns before they develop or worsen. Moreover, many broad, full-body health complications can be detected through ocular evaluation. Keep in mind that contacts are considered Class II (moderate to high risk) or Class III (high risk) medical devices; their use is often linked to changes in corneal physiology, even more reason to encourage regular in-person exams.

The Michigan Optometric Association sees great value in expanded telehealth options, but not at extreme patient risk. We hope that the Committee Chair, bill sponsor, and Members will include us as partners in this discussion to improve the bill language and to provide increased, safe options for optometric telemedicine for Michigan residents.

**We urge all Committee Members to VOTE NO on HB 4356 because it provides no quality-of-care provisions, it encourages decreased access to ongoing and preventative care, and it will increase long term healthcare costs for patients.**

Thank you for your time and consideration,

Respectfully,

William Harmon, OD, *President*  
Michigan Optometric Association