

# Help Expand Access to Needed Care

- ✓ **Support Full Enforcement of Provider Nondiscrimination Law**
- ✓ **Ensure Direct Access to Any New Medicare Vision Benefit**
- ✓ **Demand Comprehensive VA Practice Standards**

## ✓ **Fully Enforcing Federal Provider Nondiscrimination Law**

The bipartisan No Surprises Act included a provision calling on the key federal agencies to begin issuing rules to fully implement Section 2706(a) of Public Health Service Act (42 USC 300gg-5(a)) by Jan. 1, 2022.

Originally included in the Affordable Care Act, PHSA Section 2706(a) is aimed at

### **empowering patients**

with a greater ability to seek care from the health care provider of their choice and safeguarding access to covered health services from the range of providers licensed and certified to provide such services by their respective states.

Section 2706(a) aims to address growing instances of insurers suppressing subscriber utilization by limiting patient access to

covered services provided by entire categories of high-quality licensed and certified health care professionals, including doctors of optometry, providing care within the bounds of their state scope of practice.

While some self-funded union plans are now complying with the law, Section 2706(a) has never been enforced by federal regulators. The agencies responsible have largely taken a hands-off approach, urging insurers to use “a good faith, reasonable interpretation of the law.” Despite growing examples of unnecessary access to care restrictions, it is unclear if any enforcement activity has occurred since Section 2706(a) became law.

A House sign-on letter is expected soon urging full implementation and enforcement of Section 2706(a). House members are urged to join the sign-on letter and help ensure that the law works as intended by Congress and as is needed by tens of millions of patients across the country.



## **Ensure Medicare Directly Administers Any New Vision Benefit**

Too many American seniors are going without needed eye and vision care because Medicare does not cover annual comprehensive eye exams, which are an important part of ensuring that seniors see their best, prevent falls, stay independent, and maintain their quality of life.

Medicare also does not cover refraction (an element of a comprehensive eye exam used to assess visual acuity) and only covers a more complete exam if, and only if, a medical condition is found. This uncertainty leads many seniors to delay or even forgo essential eye and vision care.

AOA supports the creation of a new refraction and materials benefit under traditional Medicare, provided that the benefit is directly administered by Medicare and not subcontracted to stand-alone vision plans, which continue to implement harmful policies for Medicare Advantage patients and others. AOA also supports safeguards to ensure that unscrupulous eyeglass and contact lens sellers cannot take advantage of unsuspecting seniors.



## Should Congress consider new Medicare vision coverage,

AOA supports a benefit design which allows seniors annual access to both the care and corrective devices (eyeglasses, contact lenses, and low vision aids) they need.

## Demand New VA Practice Standards Recognize Full Range of Care Veterans Need and Deserve

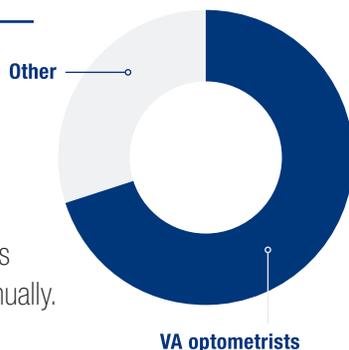
Department of Veterans Affairs (VA) doctors of optometry have proven to be an essential provider of primary and medical eye care as well as visual rehabilitation services for our nation's veterans.

Nearly 1,000 VA optometrists are currently practicing at 95 percent of the VA sites where eye care is offered and are often the only licensed independent eye care practitioner available.

VA optometrists provide care for more than

# 70 percent

of the total unique veteran visits involving eye care services annually.



In 2020, VA issued two key policies aimed at boosting veteran access to needed care by urging its medical facilities (Directive 1899) to better utilize the wide range of care doctors of optometry and others are trained and licensed to provide and by removing

a barrier (Directive 1132) that had prevented veterans nationwide from accessing VA optometrists for therapeutic laser eye care, which a growing number of states (7 so far) recognize as within a doctor of optometry's scope of practice.

Now, VA is working to develop national practice standards in conjunction with the Department of Defense (DoD) to help implement the new joint VA-DoD electronic health records system.

A priority for veteran access is ensuring that the new standards recognize ALL care (including laser care and other advanced procedures) that doctors of optometry are educated, trained, and licensed to provide. Medicare, Medicaid, the Indian Health Service, and all other major public and private payers already do.

Anything short of full recognition in the new VA standards will unnecessarily limit access to care for veterans in need. Please join with the AOA, leading lawmakers, and veteran advocates in ensuring that the coming VA national practice standards recognize the full range of care that America's doctors of optometry can provide and which our veterans need and deserve.

*The members of the American Optometric Association—America's Family Eye Doctors—are the nation's frontline providers of eye and vision care. Doctors of Optometry serve patients, including America's seniors, school-age children, veterans and military service personnel, in about 10,000 communities across the country.*

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