

216-RICR-40-05-20

TITLE 216 - DEPARTMENT OF HEALTH

CHAPTER 40 – PROFESSIONAL LICENSING AND FACILITY REGULATION

SUBCHAPTER 05 – PROFESSIONAL LICENSING

PART 20 – Optometrists

20.1 Authority

These regulations are promulgated pursuant to the authority conferred under R.I. Gen. Laws § 5-35.1-22, and are established for the purpose of adopting prevailing standards for the licensure of optometrists in Rhode Island.

20.2 Incorporated Materials

- A. These regulations hereby adopt and incorporate Ophthalmic Practice Rules, 16 C.F.R Part 456 (1992) by reference, not including any further editions or amendments thereof and only to the extent that the provisions therein are not inconsistent with these regulations.
- B. These regulations hereby adopt and incorporate The Contact Lens Rule, 16 C.F.R Part 315 (2004) by reference, not including any further editions or amendments thereof and only to the extent that the provisions therein are not inconsistent with these regulations.

20.3 Definitions

- A. Wherever used in this Part, the following terms shall be construed to mean:
 - 1. "Act" means R.I. Gen. Laws Chapter 5-35.1, entitled "Optometrists."
 - 2. "Amplified optometrist" means an optometrist licensed in this state to practice optometry and authorized by the Board to administer and prescribe pharmaceutical agents in the treatment of conditions of the human eye and its appendages, including anterior uveitis and glaucoma, without surgery or other invasive techniques, and in accordance with the Act and the requirements herein.
 - 3. "Board" means the Board of Optometry established under the provisions of R.I. Gen. Laws § 5-35.1-13.
 - 4. "Certified optometrist" means an optometrist licensed in this state to practice optometry and authorized by the Board to administer and prescribe topical ocular pharmaceutical agents in the treatment of ocular conditions of the anterior segment of the human eye and its appendages, (with the exception of uveitis

and glaucoma) without surgery or other invasive techniques, and in accordance with the requirements of the Act and this Part.

5. "Department" means the Rhode Island Department of Health.
6. "Director" means the Director, Rhode Island Department of Health.
7. "Electronic signature" means an electronic sound, symbol, or process attached to or logically associated with a record and executed or adopted by a person with the intent to sign the record.
8. "Electronic transmission prescription" means any prescription, other than an oral or written prescription, that is electronically transmitted from an optometrist authorized to prescribe to a pharmacy without alteration by a third party unless authorized by the optometrist or from one pharmacy to another pharmacy.
9. "Facsimile (FAX) prescription" means a written prescription or order that is transmitted by an electronic device that sends the exact image to the receiver (pharmacy) in a hard copy form.
10. "Optometrist" means an individual licensed in this state to practice optometry pursuant to the provisions of R.I. Gen. Laws Chapter [5-35.1](#) and this Part.
11. "Optometry" means the profession whose practitioners are engaged in the art and science of the evaluation of vision and the examination of vision and the examination and refraction of the human eye which includes: the employment of any objective or subjective means for the examination of the human eye or its appendages; the measurement of the powers or range of human vision or the determination of the accommodative and refractive powers of the human eye or the scope of its functions in general and the adaptation of lenses, prisms, and/or frames for the aid thereof; the prescribing, directing the use of or administering ocular exercises, visual training, vision training, or orthoptics, and the use of any optical device in connection with these; the prescribing of contact lenses for, or the fitting or adaptation of contact lenses to the human eye; the examination or diagnosis of the human eye to ascertain the presence of abnormal conditions or functions; and the application of pharmaceutical agents to the eye. Provided, however, that no optometrist licensed in this state shall perform any surgery for the purpose of detecting any diseased or pathological condition of the eye. With respect to presently licensed optometrists, only presently licensed optometrists who:
 - a. Have satisfactorily completed a course in pharmacology, as it applies to optometry, at an institution accredited by a regional, professional, or academic accreditation organization which is recognized by a national commission on accreditation, such as the Accreditation Council on Optometric Education (ACOE), with particular emphasis on the application of drugs to the eye for the purposes of detecting any diseased

or pathological condition of the eye; or the effects of any disease or pathological condition of the eye, approved by the Board of Optometry and the Department; or

- b. Have successfully passed all sections of the National Board of Examiners in Optometry (NBEO) examination; and the treatment and management of ocular disease (TMOD) examination shall be permitted to apply pharmaceutical agents to the eye for the purpose of detecting any diseased or pathological condition of the eye, or the effects of any disease or pathological condition of the eye.
12. "Pharmaceutical agents" means any medications as determined by the Department, except those specified in schedules I and II as provided in R.I. Gen. Laws Chapter [21-28](#).
13. "Vision training", as referenced in the definition of optometry in § 20.3(A)(11) of this Part, includes:
- a. "Vision therapy" means the assessment, diagnosis, treatment, or prescription of treatment for conditions of the visual system or management of a patient with vision therapy, visual training, visual rehabilitation, orthoptics or eye exercises. Anyone who holds him/herself out as being able to do so for the rehabilitation and/or treatment of physical, physiological, sensorimotor, neuromuscular or perceptual anomalies of the eyes or vision system or who prescribes or utilizes lenses, prisms, filters, occlusion, or other devices for the enhancement, rehabilitation and/or treatment of the visual system or prevention of visual dysfunctions, except under the supervision and management of a licensed optometrist, is engaged in the practice of optometry.
 - b. "Low vision rehabilitation" means the evaluation, diagnosis, and management of the low vision patient, including but not limited to, prescription, low vision rehabilitation therapy, education and interdisciplinary consultation when indicated. Any person who prescribes or provides comprehensive low vision care for the rehabilitation and/or treatment of the visually impaired or legally blind patient, prescribes corrective spectacles, contact lenses, prisms, or filters, employs any means for the adaptation of lenses, low vision devices, prisms, filters, evaluates the need for, recommends, or prescribes optical, electronic or other low vision devices; or recommends or provides low vision rehabilitation services independent of a clinical treatment plan prescribed by an optometrist or ophthalmologist shall be considered to be engaged in the practice of optometry.

20.4 Licensure and Certification Requirements for Optometrists

20.4.1 Licensure and Certification Requirements

- A. Any person practicing or offering to practice optometry in this state must be licensed as an optometrist in Rhode Island in accordance with R.I. Gen. Laws Chapter 5-35.1 and regulatory requirements of this Part.
 - 1. Furthermore, optometrists licensed in this state who desire to administer and prescribe pharmaceutical agents in the treatment of ocular conditions of the human eye and its appendages, without the use of surgery or other invasive techniques, must be certified by the Board in accordance with the requirements herein. Provided, however, that as of March 20, 1997, individuals who are licensed and certified to prescribe certain topical therapeutic pharmaceutical agents may continue to prescribe said medications in accordance with that certification; and those individuals who hold diagnostic pharmaceutical privileges as of March 20, 1997, may continue to exercise those privileges.
- B. Any optometrist who utilizes latex gloves shall do so in accordance with the provisions of the rules and regulations pertaining to the Use of Latex Gloves by Health Care Workers, in Licensed Health Care Facilities, and by Other Persons, Firms, or Corporations Licensed or Registered by the Department (Part 20-15-3 of this Title).
- C. Pain Assessment
 - 1. All health care providers licensed by this state to provide health care services and all health care facilities licensed under R.I. Gen. Laws Chapter 23-17, shall assess patient pain in accordance with the requirements of the “Rules and Regulations Related to Pain Assessment.”

20.4.2 Qualifications for Licensure and Certification Basic Licensure Requirements

- A. In addition to the requirements of R.I. Gen. Laws § 5-35.1-2, an applicant seeking licensure to practice optometry in this state must:
 - 1. Have successfully passed all sections of the National Board of Examiners in Optometry (NBEO) examination;
 - 2. Candidates seeking initial licensure in Rhode Island must be certified in the use of therapeutic pharmaceuticals in accordance with the requirements of R.I. Gen. Laws § 5-35.1-1(7), and have successfully completed the educational and certification requirements related to the amplification of privileges to treat anterior uveitis and glaucoma of § 20.4.2(B) of this Part.
- B. Therapeutic Pharmaceutical Requirements Related to Amplification of Privileges to Treat Anterior Uveitis and Glaucoma
 - 1. All applicants for initial licensure or any licensed applicant who seek certification to use all therapeutic pharmaceuticals used in the treatment of conditions of the human eye and its appendages including, but not limited to, the removal of superficial foreign bodies from the eye and the treatment of the diseases of anterior uveitis and glaucoma, without the use of surgery or other invasive

techniques, shall have successfully completed the National Board of Examiners in Optometry (NBEO) examination in "The Treatment and Management of Ocular Disease" administered after January 1, 1999.

C. § 20.4.2(C)(1) of this Part shall apply to optometrists who have graduated from a college of optometry prior to January 1, 2007:

1. Upon successful completion of the written National Board of Examiners in Optometry (NBEO) examination, in "The Treatment and Management of Ocular Disease" administered after January 1, 1999, a duly licensed optometrist may prescribe all such pharmaceuticals exclusive of those used in the treatment of glaucoma. Prescriptive privileges for those pharmaceuticals used in the treatment of glaucoma will commence upon completion of § 20.4.2(C)(1)(a) of this Part and acceptance of such by the Board.
 - a. Submit a completed form for each patient providing evidence that the applicant has performed written consultations which satisfy the following requirements:
 - (1) The applicant has consulted with an ophthalmologist or optometrist with amplified privileges to treat glaucoma, who is licensed in good standing, and who has been treating glaucoma for no less than three (3) years regarding no less than twenty (20) glaucoma-related patients and the ophthalmologist or optometrist with amplified privileges to treat glaucoma, who is licensed in good standing, and who has been treating glaucoma for no less than three (3) years has provided written confirmation of this consultation.
 - (2) Up to ten (10) of these glaucoma-related patients may have been diagnosed as glaucoma-related up to one (1) year prior to completion of the requirements in § 20.4.2(C)(1) of this Part. All twenty (20) glaucoma-related patients shall be followed for a minimum of one (1) year or until the patient is stabilized (i.e., symptoms controlled, vision loss arrested, medication changes not required) whichever is longer; and
 - (3) For each glaucoma-related patient, the applicant shall develop, in consultation with the ophthalmologist or optometrist with amplified privileges to treat glaucoma, who is licensed in good standing, and who has been treating glaucoma for no less than three (3) years the following:
 - (AA) A confirmatory evaluation and diagnosis by the ophthalmologist or optometrist with amplified privileges to treat glaucoma, who is licensed in good standing, and who has been treating glaucoma for no less than three (3) years;

- (BB) A written plan for diagnostic workup for each patient. This workup shall be in accordance with the prevailing community standard of care; and
 - (CC) A treatment plan for each patient which shall take into account the assessment of the optic nerve, the level of the intraocular pressure, and stability of the clinical course.
- (4) The methodology of consultation required in §§ 20.4.2(C)(1)(a)((1)) and ((2)) of this Part shall be left to the professional discretion of the ophthalmologist or optometrist with amplified privileges to treat glaucoma, who is licensed in good standing, and who has been treating glaucoma for no less than three (3) years and the applicant; provided, however, the applicant may submit to the Board of Examiners in Optometry the completed form once the patient has reached the agreed upon treatment plan (including target pressure and compliance with medications).

20.4.3 Application for License, Certification and Fees Licensure Application

- A. Application for licensure shall be made on forms provided by the Department, which shall be completed and submitted to the Department. Such application shall be accompanied by the following documents:
1. If by endorsement, a statement from the board of examiners in optometry in each state in which the applicant has held or holds licensure to be submitted to the board of this state attesting to the licensure status of the applicant during the time period the applicant held licensure in said state;
 2. Supporting certified transcripts of education credentials as required in § 20.4.2(A) of this Part.
 3. Such documentation must consist of original statements and/or photocopies bearing the signature of the dean or registrar and the imprint of the school seal;
 4. The results of the written National Board Examination submitted directly to the Board by the National Board;
 5. The application fee as set forth in the Fee Structure for Licensing, Laboratory and Administrative Services Provided by the Department of Health (Part 10-05-2 of this Title); and
 6. Such other information as the Board and/or Department may deem necessary.

20.4.4 Examinations

- A. Examinations for Licensure

1. Applicants for licensure to practice optometry shall be required to successfully complete all parts and all sections of the National Board Examination of the National Board of Examiners in Optometry (NBEO) in order to test the applicant's knowledge and skills to practice optometry in this state pursuant to the statutory and regulatory requirements of this Part.
- B. Licensure by Endorsement
1. A license to practice optometry may be issued without examination to an applicant who has been duly licensed by examination as an optometrist under the laws of another state or jurisdiction provided:
 - a. The applicant meets the qualifications to practice optometry in this state in accordance with § 20.4.2 of this Part;
 - b. That such state accords a like privilege to holders of licenses issued in this state and the applicant has not failed to pass the exam required in this state; and
 - c. The applicant submits the license application form with supporting certified documentation of credentials and application fee as set forth in the Fee Structure for Licensing, Laboratory and Administrative Services Provided by the Department of Health (Part 10-05-2 of this Title).

20.4.5 Issuance and Renewal of License and Fee

- A. Upon completion of the aforementioned requirements, the Director may issue a license to those applicants found to have satisfactorily met all the requirements of this Part. Said license and/or certification shall expire annually on the 31st day of January, unless sooner suspended or revoked.
- B. Every person licensed who intends to practice optometry during the ensuing year shall file a renewal application duly executed together with the renewal fee for licensure as set forth in the Fee Structure for Licensing, Laboratory and Administrative Services Provided by the Department of Health (Part 10-05-2 of this Title) on or before the 31st day of January in each year.
- C. Upon receipt of a renewal application accompanied by evidence of completion of the prescribed continuing education program requirements as set forth in § 20.4.6 of this Part, including payment of fee, the accuracy of the application shall be verified and license shall be granted effective February 1 of that year.
- D. In case of neglect or refusal to pay, the Department may revoke or suspend such license provided, however, that no license shall be so suspended or revoked without first giving sixty (60) days notice in each such case of neglect or refusal and within such period any such optometrist shall have the right to receive a renewal of such license on payment of the renewal fee, together with an added penalty as set forth in the Fee

Structure for Licensing, Laboratory and Administrative Services Provided by the Department of Health (Part 10-05-2 of this Title).

- E. Retirement from practice for a period not exceeding five (5) years shall not deprive the holder of a license of the right to renew such license upon payment of all annual renewal fees remaining unpaid, and a further fee as set forth in the Fee Structure for Licensing, Laboratory and Administrative Services Provided by the Department of Health (Part 10-05-2 of this Title).

20.4.6 Continuing Education

- A. For Re-Licensure for those Optometrists with Amplified Therapeutic Privileges:
 - 1. Every optometrist licensed to practice optometry with amplified therapeutic privileges in this state under the provisions of the Act and this Part shall on or before the 31st day of January of every year attest to the Board that he/she possesses satisfactory evidence of having completed in the preceding calendar year, no less than twenty (20) hours of continuing education in optometry or other related health field, in course(s) that shall include ten (10) or more hours of approved courses in pharmacology for the treatment and management of ocular conditions of the eye offered, sponsored, or administered by any of the following organizations:
 - a. American Optometric Association and its affiliated associations;
 - b. Schools/colleges of optometry;
 - c. Any course approved by the Council on Optometric Practitioners Education (COPE);
 - d. American Academy of Ophthalmology – Category I;
 - e. All courses that meet the requirements of eligibility for Category I of the American Optometric Association Optometric Recognition Award;
 - f. American Academy of Optometry;
 - g. Accreditation Council for Pharmacy Education (ACPE);
 - h. Accreditation Council for Continuing Medical Education (ACCME).
- B. For Re-Licensure for those Optometrists without Amplified Therapeutic Privileges:
 - 1. Optometrists licensed to practice optometry without therapeutic privileges must show evidence of sixteen (16) hours of continuing education in optometry or other related health fields in the calendar year preceding the most recent license renewal.

2. The Board may waive the continuing education requirement in specific circumstances for due cause such as hardship or for any sufficient reason, if satisfactory evidence is submitted to the Board to that effect.
3. Optometrists initially licensed after the February 1st renewal date shall be exempt from the continuing education requirements stated in this Part until the date of the next renewal cycle (i.e., January 31st of the next year).
4. It shall be the sole responsibility of the individual optometrist to obtain documentation from the recognized sponsoring or co-sponsoring organizations, agencies or other, of his or her participation in the learning experience and the number of dated credits earned. Furthermore, it shall be the sole responsibility of the individual to safeguard the documents for review by the Board, if required. These documents shall be retained by each licensee for no less than two (2) years and are subject to random audit by the Department.

20.4.7 Practice of Optometry

- A. Pursuant to § 20.4.2(B)(1) of this Part, optometrists with amplified privileges, as defined in this Part, may:
 1. Remove superficial foreign bodies from the conjunctiva, lid and cornea without surgery or other invasive techniques; and
 2. Administer and prescribe pharmaceutical agents as provided in this Part for the treatment of ocular conditions of the human eye and its appendages without surgery or other invasive techniques, and in accordance with the prevailing standards of practice as those of duly licensed physicians providing similar services.
 3. Treatment of glaucoma shall exclude treatment of infantile and congenital glaucoma. Treatment of acute angle closure glaucoma shall be limited to initiation of immediate emergency care.
- B. Scope of Medications
 1. Optometrists Without Amplified Therapeutic Privileges
 - a. Medications which may be used by certified optometrists qualified to administer and prescribe topical therapeutic pharmaceutical agents in the treatment of conditions of the human eye and its appendages but not holding amplified privileges in accordance with § 20.4.2(B)(1) of this Part, include topical medication (mast cell inhibitors or stabilizers), lubricants, decongestants, mucolytics, antibiotics, and steroids with a clinical potency not exceeding 1/4% methyl-prednisolone or equivalent.
 2. Optometrists with Amplified Therapeutic Privileges

- a. Optometrists authorized by the Board as having amplified privileges, in accordance with § 20.4.2(B)(1) of this Part, may utilize all pharmaceutical agents in the treatment of conditions of the human eye and its appendages, including anterior uveitis and glaucoma, without surgery or other invasive techniques, and in accordance with the requirements of this Part.

C. Scheduled Medications

1. Every optometrist licensed to practice optometry with amplified therapeutic privileges in this state may prescribe oral pharmaceutical agents, including oral steroids and narcotic and non-narcotic analgesics, within the scope of the optometrist's practice, and in accordance with the following:
 - a. A prescription for oral nonsteroidal anti-inflammatories shall not exceed one seven-day supply;
 - b. A prescription for oral steroids shall not exceed one seven-day supply;
 - c. A prescription for any controlled substance listed in schedules III—V of [R.I. Gen. Laws Chapter 21-28](#), shall not exceed one seventy-two (72) hour supply.
 - d. Licensed optometrists may prescribe schedule II hydrocodone-containing medications provided that the prescription does not exceed one seventy-two (72) hour supply.
 - e. No optometrist shall deliver any medication by injection.
 - f. In order to prescribe any controlled substance listed in [R.I. Gen. Laws Chapter 21-28](#), a licensed optometrist must:
 - (1) Obtain a state registration for prescribing controlled substances by completing the application for registration.
 - (2) Obtain a federal registration for controlled substances by completing application form DEA-224, or its successor form, and submitting it with its specified filing fee.
 - (3) The Director will determine whether issuance of a registration is consistent with the public interest, and may refuse registration where the issuance of said registration would be inconsistent with the public interest, according to the provisions of R.I. Gen. Laws Chapter [21-28](#).

D. Minimum/Initial Examination of New Patients

1. Pursuant to R.I. Gen. Laws § 5-35.1-16, every person practicing optometry shall perform an examination of the patient that is in accordance with the prevailing community standard of care, and record same in the patient's medical record.

E. Minimum Equipment for Optometric Practice

1. At any location where an optometrist practices his or her profession, an optometrist shall have any equipment that a reasonable and prudent person practicing optometry would have available in order to meet the needs of his/her patients.

F. Spectacle or Eyeglass Prescriptions

1. A spectacle prescription shall contain all of the information necessary for the accurate fabrication, fitting and dispensing of the spectacles (eyeglasses). All spectacle prescriptions shall be in accordance with the requirements of the Federal Trade Commission's "Ophthalmic Practice Rules" incorporated in § 20.2(A) of this Part.
2. A contact lens prescription shall contain all of the information necessary for the accurate fitting and dispensing of the contact lens. All such prescriptions shall be in accordance with the requirements of the Federal Trade Commission's "Contact Lens Rule" incorporated in § 20.2(B) of this Part.

G. Electronic Prescribing Standards

1. Optometrists shall be required to adhere to electronic prescribing standards within thirty (30) months of receiving prescriptive authority as defined in R.I. Gen. Laws § 5-35.1-12(a), and § 20.4.7 of this Part.
2. Electronic prescribing standards shall include the following:
 - a. Technological devices for the transmission or communication of prescriptions between optometrists and pharmacists may be used in accordance with the following requirements:
 - (1) The transmission of prescriptions for controlled substances shall be in compliance with the provisions of R.I. Gen. Laws Chapters 21-28 ("Uniform Controlled Substances Act") and 5-37.3 ("Confidentiality of Health Care Communications and Information Act"), and all other applicable federal and state laws;
 - (AA) In compliance with federal requirements, the transmission of prescriptions for controlled substances by technological devices shall consist of a copy of the original prescription that has been signed by the optometrist.

- (BB) In compliance with federal requirements, an electronic signature by the optometrist for controlled substance prescriptions is prohibited.
- (2) Unless otherwise prohibited by law, prescriptions may be transmitted by electronic means or facsimile from the optometrist to the dispensing pharmacy. The facsimile copy of the prescription may serve as the hard copy of the prescription in accordance with the provisions of [R.I. Gen. Laws Chapter 21-28](#).
- (3) In addition to all other information required to be included on a prescription, an electronically transmitted prescription and facsimile prescriptions shall include the date of transmission, and the identity of the receiving pharmacy.
- (4) The patient shall have the right to choose the manner in which his/her prescription is transmitted to the pharmacy.
- (5) The patient shall have the right to choose the pharmacy to which his/her prescription is transferred.
- (6) Technological devices shall not be used to circumvent documentation, verification, or any provisions of [R.I. Gen. Laws Chapter 5-19.1](#). Neither shall they be used to commit any other action that may be deemed unprofessional conduct.

20.4.8 Denial, Suspension or Revocation of License and/or Certification

The Director may deny, suspend or revoke a license in accordance with [the provisions of R.I. Gen. Laws § 5-35.1-18](#).

20.5 Advertising, Violations, Practices, Procedures and Severability

20.5.1 Advertising

- A. Pursuant to R.I. Gen. Laws § [5-35.1-9\(2\)\(ii\)](#), no optometrist licensed by and practicing in this state shall advertise by written or spoken word of a character tending to deceive or mislead the public.
- B. An optometrist who holds him/herself out to be a specialist in a specific field of optometry practice shall include a statement in all advertisements that reads as follows, "The Rhode Island Department of Health licenses all optometrists in the general practice of optometry. The Department does not license or certify any optometrist as an expert or specialist in any field of practice."
- C. In addition to § 20.5.1(A) of this Part any and all advertising conducted by any optometrist shall conform to the provisions of R.I. Gen. Laws Chapter 6-13.1, entitled "Deceptive Trade Practices Act."

- D. Any person practicing pursuant to the provisions of R.I. Gen. Laws Chapter 5-35.1, shall be required to post his name on the premises where the services are being offered in such a manner as to be clearly visible to the public at the entrance to the premises and on any sign visible outside of the premises which offers the delivery of optometric services.
- E. Advertisement of any type (electronic or print media) shall also include the name(s) and address(es) of the responsible optometrist(s).

20.5.2 Violations

Penalties for violations are in accordance with R.I. Gen. Laws [§ 5-35.1-20](#).

20.5.3 Rules Governing Practices and Procedures

All hearings and reviews required under the provisions of the Act shall be held in accordance with the provisions of the rules and regulations regarding Practices and Procedures Before the Department of Health (Part 10-05-4 of this Title) and Access to Public Records (Part 10-05-1 of this Title).

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PART 20 - Optometrists (216-RICR-40-05-20)

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