NEVADA STATE BOARD OF OPTOMETRY



CHEN K. YOUNG, O.D. Board President

MARIAH SMITH, O.D. Board Vice-President

Post Office Box 1824 Carson City, Nevada 89702 Telephone: (775) 883-8367 Facsimile: (775) 305-0105

CAREN C. JENKINS, ESQ. Executive Director cienkins@nvoptometry.org JEFFREY AUSTIN, O.D. Board Member

DREW JOHNSON Public Board Member

AGENDA & NOTICE OF PUBLIC MEETING

The Nevada State Board of Optometry will hold a <u>telephonic</u> meeting Thursday, March 19, 2020, at 12 Noon

The public is invited to attend telephonically,
Dial (712) 451-0223, Access code: 292304,
or participate at the Board's physical location at
937 Mica Dr. #17 in Carson City

AGENDA

Pursuant to NRS 241.020(6) PLEASE TAKE NOTICE: (1) Items on the agenda may be taken out of order, (2) two or more agenda items may be combined for consideration; and (3) at any time, items on the agenda may be removed from the agenda or discussion of the items may be delayed.

*INDICATES ACTION MAY BE TAKEN.

- Welcome, Introductions and Public Comment.
- A time limit may be set for each individual wishing to address the Board. No action will be taken on any issue initially presented either in public comment or during the Board Meeting. In accordance with the Nevada Open Meeting Law, an issue requiring action may be placed on an agenda for a future Board Meeting.
- Call to Order, Roll Call.
- 3. * For Possible Action. Consideration and approval of the minutes of January 7, 2020 Optometry Board meeting.
- 4. * For Possible Action. Consideration of Applications for Certificate to Treat Persons with Glaucoma by Endorsement.

- 5. * For Possible Action. Discussion/Potential emergency action in response to COVID-19.
- 6. * For Possible Action. Determination whether just and sufficient cause exists to impose, refund or waive fees.
 - A. Licensees who have provided insufficient CE for renewal.
 - B. Licensees who have failed to respond to requests for additional information to complete renewal.
 - C. Licensees who fell victim to a glitch in our renewal application.
 - D. Licensee who demands a refund due to misunderstanding (Corbridge).
- 7. * For Possible Action. Discussion and possible action to lift Regulatory Reprieve.
- 8. * For Possible Action. Executive Director's Report and Request for Action
 - A. License Renewals Report: Nancy A. Padilla, Licensing Specialist
 - B. Office move and extension of lease terms, related expenses.
 - C. Need to open additional bank account to access FDIC and other protections for 2nd year of biennial renewals
 - D. Desire to move Board's operating account to Bank of America or Wells Fargo.
 - E. Ratification of President's permission to hire temporary staff during renewals.
 - F. Other reports/information
- 9. Announcements and requests for future Board consideration (No action taken at this meeting).

NEXT BOARD MEETING scheduled for April 14, 2020 at Noon via teleconference. Remaining FY 2019-2020 meetings scheduled for May 19, 2020 and June 16, 2020.

10. Public Comment.

A time limit may be set for each individual wishing to address the Board. No action will be taken on any issue initially presented either in public comment or during the Board Meeting. In accordance with the Nevada Open Meeting Law, an issue requiring action may be placed on an agenda for a future Board Meeting.

11. *For Possible Action. Adjournment.

The Board posted this notice at the board office, on the board website (<u>nvoptometry.org</u>), the State of Nevada Public Notices website (<u>https://notice.nv.gov</u>) and in the following locations:

Office of the Nevada Attorney General at 5420 Kietzke Lane, Reno & 555 E. Washington Ave. #3900, Las Vegas; and Douglas County Courthouse, 1616 8th Street, Minden.

The Board will take reasonable measures to accommodate persons with disabilities to attend the meeting. Please call Caren C. Jenkins at (775) 883-8367 in advance to make arrangements.

MEETING MATERIALS: To view the meeting materials provided to the Board in advance, if any, visit www.nvoptometry.org, or obtain a hard copy 5 days in advance by emailing a request to admin@nvoptometry.org.

February 26, 2020

Nevada Board of Optometry
P.O. Box 1824
Carson City, NV 89702
Re: Glaucoma Certification by Endorsement

To Whom It May Concern:

Please accept this letter as an expressed interest in becoming certified to diagnose and treat glaucoma by endorsement. Pursuant to NRS 636.2897, I am a Nevada-licensed optometrist (License 896), I am TPA-Certified, I hold an unrestricted license to diagnose and treat glaucoma in California, and I have not been reported to the national Practitioners DataBank at any point during my professional career.

I have held a license to practice optometry in California (License 14157TLG) since 2011. The TLG indicator at the end of my license number indicates that I am certified for Therapeutics (TPA-Certified), Lacrimal dilation and irrigation, and Glaucoma management. Over the course of my career in California, I would estimate that I have diagnosed and/or managed over 2000 patients with glaucoma, which is substantially higher than the typical licensing requirement of the Nevada Board of Optometry. I have worked in several practices that were focused on ocular disease and had a large number of patients with glaucoma, specifically.

These days, I spend most of my professional time treating residents of long-term care facilities (mostly skilled nursing facilities). As you are can imagine, most of my patients are elderly, have multiple systemic and ocular health conditions, limited mobility, and practically no access to specialty eyecare. I do see quite a bit of glaucoma as well as many other ocular health conditions in these patients. I intend to continue to co-manage many of my patients with glaucoma with their existing glaucoma specialists, but it would certainly be more convenient for all parties if I was able to provide glaucoma care, independently, when appropriate. By granting me certification to treat glaucoma, by endorsement, you will allow me to take a more active role in providing a higher level of care than most of my patients are currently able to receive.

Please feel free to contact me should you have any questions or concerns about this request for glaucoma certification by endorsement.

Warm Regards,



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To whom it may concern,

My name is I graduated from Suny college of Optometry in 2011 and I have had the pleasure of practicing in this beautiful field since then. Initially, after graduation I had moved back to Canada (my home country) and began working full time at a private practice for 4+ years, performing routine eye exams which included managing and treating various eye diseases including Glaucoma. As a new grad, I was collaborating with a few M.Ds in treating their existing Glaucoma patients, refilling topical prescriptions, running visual fields, checking IOPs, and dilating these patients to monitor their progress. As time went on I was able to identify many Glaucoma suspects and run the above tests to monitor for any changes. If any suspects exhibited definitive progression then treatment was initiated, sometimes in collaboration with M.Ds. Any individuals requiring further treatment beyond topicals were referred out to M.Ds and then sent back to me for observation. I do recall one case in Canada where a patient came in with IOPs above 50mmHg OU, I initiated an alpha agonist, kept them in my office and periodically checked the IOPs whilst keeping in touch with the M.D; once under 30 the patient was sent off to the M.D. for further evaluation. It was a memorable case in my early years of practice, a good learning tool, and a great team effort.

In 2016, I moved to Chicago IL after getting married where I obtained my license. However, in Illinois the Optometry license itself grants you the access to practice full-scope Optometry including prescribing TPAs and treating Glaucoma without any additional special certifications or requirements. I can provide the information regarding their board requirements if needed. I had practiced full scope Optometry in that state from 2016 to the end of 2018 (my license expired in 2020) working at various practice models ranging from private practices to a LASIK center run by an ophthalmologist. In my experience in IL, I had worked with a very heavy medicaid population in which a lot of ocular diseases such as Glaucoma were prevalent. I have identified many Glaucoma suspects, initiated treatment in countless patients who were previous suspects as well as provide care to existing Glaucoma patients. I was initiating and refilling Glaucoma medications, adjusting their treatment plans and continually monitoring for changes via various instruments like pachymeter, dilation/optomap; OCT, visual fields and even ERG at my disposal. I referred out more complicated cases of patients requiring additional treatment besides topicals to M.Ds for procedures such as SLT/ALT or MIGs surgery.

At:the LASIK center, the ophthalmologist had many patients who had Glaucoma or were suspects, hence I played a vital role in treating existing patients, diagnosing new suspects and of course managing patients in the same manner as the past experiences. Again I had access to many great tools like visual fields,

OCTs, and pachymeter to work with and if any patient needed collaboration I did not hesitate to reach out to the chief M.D. at that clinic. It was a great experience working alongside an M.D. in the same office sharing knowledge and collaborating on different cases. Thave managed many forms of Glaucoma throughout my career including but not limited to normotensive, open-angle, narrow-angle, steroid-induced and traumatic Glaucoma.

Since my move to Las Vegas, I have seen countless patients who were Glaucoma suspects, for whom I had ordered further testing to potentially diagnose them. If all their results were within normal limits, I continued to monitor them, however, if there was the potential of Glaucoma based on IOPs, optic nerve evaluation, visual field or OCTs then I referred them to the other ODs in our group practice possessing the Glaucoma license or I referred the patients out to various M.D practices (depending on who took their medical insurance) such as New Eyes, Nevada eye physicians, Wellish or Center for sight etc. There they took the patients under their wing to treat and manage Glaucoma while I was continually seeing those patients for their refractive or external ocular surface needs. Many existing patients were already diagnosed and treated by their M.Ds for Glaucoma and I encouraged them to maintain their follow-ups with their specialists while again meeting other ocular and refractive needs. Although currently, my license may not allow me to treat Glaucoma but I have still maintained my knowledge and practice in this field of Glaucoma.

I have been in excellent standing with the board in Canada, Illinois, and Nevada without any restrictions and no reports have been made to the national Practitioners DataBank. In summary, I have been in this amazing field of Optometry for 9 years now and I have been able to practice full-scope including TPAs, treatment, and management of Glaucoma. I possess the qualifications as I have undergone extensive education as my peers as well as I have many years of experience under my belt. I would be ever so grateful if the board would allow me to continue with this endeavor of being able to practice full-scope Optometry in treating and managing Glaucoma. If there is any additional information that is needed, please do not hesitate to ask.

Thank you
Kind Regards,
O.D.

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To: Nevada State Board of Optometry

From: Dr.

Re: Certificate by Endorsement to treat persons diagnosed with glaucoma

My name is and I am currently an OPAC licensed optometrist practicing in Las Vegas,
Nevada. From 2004 through 2018 I practiced in Arizona providing full scope optometry including
glaucoma treatment. I treated hundreds of patients with glaucoma in my offices in Kingman and
Bullhead City, Arizona during my 14 years practicing in these rural areas I saw many different types of
glaucoma disease. Some patients were more difficult than others and for these complex cases I was
fortunate to co-manage with Dr. Aiyin Chen, Dr. Mazeyar Saboori and Dr. Kent Wellish of the Wellish
Vision Institute. I feel very comfortable working with these ophthalmologists and it would be a seamless
transition for me to continue treating and referring patients if need be while working here in Las Vegas
since we have worked closely together so many times before.

I have maintained a spotless professional reputation in Arizona with no restrictions treating patients with glaucoma and never had a disciplinary action against me and have no reports to the National Practitioners Databank for disciplinary actions.

I feel my experience with persons with diagnosed glaucoma in Arizona would be a huge asset to my work here in Nevada. I am extremely confident in my abilities to detect and treat these patients.

I thank you in advance for your consideration in allowing me to receive a certificate by endorsement to treat persons diagnosed with glaucoma.

If there is any additional information you would like for me to provide it would be my pleasure.

Yours Truly,



GLAUCOMA CERTIFICATE BY ENDORSEMENT NARRATIVE



February 5, 2020

I am licensed and certified to treat glaucoma in New York State since 1995 with New York Optometry license. At that time New York State amended the optometry law to allow doctors of optometry to treat glaucoma. Each OD had to have passed the TPA National Board exam and was required to co-manage with an ophthalmologist seventy-five (75) patients who had glaucoma or ocular hypertension. Doctors of Optometry had three years to fulfill this requirement with the names of the patients and the co-managing physicians reviewed by the State Education Department.

I believe that within a year I had fulfilled this requirement and was privileged to diagnose and treat glaucoma independently. I immediately began treating glaucoma and did so for 12 years in New York State until my son

My wife, and I moved to Southern California in December of 2007. In February of 2009 I joined a very large MD practice with four locations (La Quinta, Palm Desert, Rancho Mirage and Palm Springs) called Eye Institute. MD was the president and clinical director of 5 MDs and 5 ODs.

My initial California license number was OPT which allowed me to treat all eye diseases with topical and oral medications. California required optometrist who desired to treat glaucoma, to take a didactic course in the diagnosis and treatment of glaucoma and pass a test at each phase of the

course material and then to see 25 glaucoma patients. I took and passed the BOLD course which was given by the Berkley School of Optometry in 2011, saw the 25 glaucoma patients at Western College of Optometry at Western University. California Board of Optometry amended my license to OPT TG which allow me to independently diagnose and treat anterior segment eye disease with the therapeutics and glaucoma. Later in the year I applied and received approval for lacrimal dilation which changed my license to OPT TLG. I diagnosed and treated glaucoma almost daily until we moved to Nevada last year. Each office was equipped with an OCT, Humphrey Visual Field, retinal photography, and pachymeter. I have treated hundreds of glaucoma patients in my almost 20 years of glaucoma certification in New York and California.

Enclosed is a copy of my California license. I am also enclosing the certification of successful completion and course outline from the BOLD course, and the Certificate of Participation in Continuing Education from Western for the Glaucoma Grand Rounds. I am presently Adjunct Faculty at SCCO with a faculty rank of Assistant Professor and I am also including that letter. I have taken hundreds of hours of glaucoma diagnosis and treatment CE courses and look forward to helping guide my patients to maximal visual efficiency and health.

Please let me know if this letter appropriately fulfills Nevada's endorsement narrative.



2450 Del Paso Road, Suite 105 Sacramento, CA 95834 (916) 575-7170





LICENSED OPTOMETRIST

Jicense No. OPT - TLG

Expiration 06/30/2020



Receipt No. 10821

BERKELEY ONLINE LECTURES AND DEMONSTRATIONS

CERTIFICATE OF COMPLETION

This is to certify that

on December 14, 2011 CA Lic # 6542T successfully completed the following two California Optometric Education requirements

Glaucoma Certification Lecture Courses

BOLD 16-hour Glaucoma Case Management Course BOLD 24-hour Glaucoma Didactic Course

December 14, 2011

The Berkeley Online Lectures and Demonstrations (BOLD) CE Program certifies that the following optometrist completed the continuing education course and passed the exam given at the end of the course.

Name:

Lic CA:

T

Course Title:

"Glaucoma Case Mangement and Advanced Glaucoma

Case Mangement"

Course Length:

16 hours

Date:

December 14, 2011

The course included cases and presentations by these:

Jill Autry, OD, RPh
Frank Balestrery, OD, MS
Carl Jacobsen, OD
Ron Guiley, OD, MPH
David Hicks, OD
Ron Melton, OD, and Randall Thomas, OD, MPH
Todd Severin, MD
Karen Walker-Brandreth, OD

Berkeley Online Lectures and Demonstrations c/o School of Optometry 302 Minor Hall University of California Berkeley, CA 94720-2020

Berkeley Online Lectures and Demonstrations

c/o UC Berkeley School of Optometry 302 Minor Hall University of California Berkeley, CA 94720-2020

The Berkeley Online Lectures and Demonstrations (BOLD) CE Program hereby certifies that the following optometrist completed the Glaucoma Continuing Education course and passed the exam given at the end of the course.

Name:

Opt. License No. (Calif.):

T T

Course:

24-hr Didactic Glaucoma Course - Part 1

Course Title: ·

"Detection and Diagnosis of Glaucoma"

Course Length:

8 hours of Continuing Education

Date:

November 2, 2011

"The Definition of Glaucoma"

Karen Walker-Brandreth, OD

"The Natural History of Glaucoma"

Karen Walker-Brandreth, OD

"Primary Open Angle Glaucoma Overview"

Mika Moy, OD

"Secondary Glaucomas"

Christina Wilmer, OD

"Risk Factors of Glaucoma"

Karen Walker-Brandreth, OD Richard Van Sluyters, OD, PhD

"Aqueous Humor Production and Removal"

Robert Stamper, MD

"Intraocular Pressure and Its Measurement"
"Gonioscopy in Glaucoma"

Meredith Whiteside, OD

"Gonioscopy Demonstration"

Paul Peng, OD, MA, JD

"Optic Nerve - Anatomy and Physiology"

Richard Van Sluyters, OD, PhD

"The Optic Nerve in Glaucoma"

Karen Walker-Brandreth, OD

"Visual Field Testing/Interpret. in Glaucoma"

Frank Balestrery, OD, MS

The above 8-hour course and examination fulfills the part of the educational requirements for Glaucoma Certification as specified by SB 1406. In addition, it fulfills eight hours of TPA CE online education for optometric relicensure in California.

Regards,

Berkeley Online Lectures and Demonstrations

CE@BOLDoptometry.org

888-308-3128

www.BOLDoptometry.org

Attendance Certified by the University of California School of Optometry

Berkeley Online Lectures and Demonstrations

c/o UC Berkeley School of Optometry 302 Minor Hall University of California Berkeley, CA 94720-2020

The Berkeley Online Lectures and Demonstrations (BOLD) CE Program hereby certifies that the following optometrist completed the Glaucoma Continuing Education course and passed the exam given at the end of the course.

Name:

Opt. License No. (Calif.):

Course:

24-hr Didactic Glaucoma Course -- Part 2

Course Title: -

"Treatment and Management of Glaucoma"

Course Length:

8 hours of Continuing Education

Date:

November 30, 2011

"Legal Aspects of Glaucoma and California SB 1406" - Lawrence Thal, OD, MBA

"New Strategies for the Diagnosis and Monitoring of Glaucoma" - Todd D. Severin, MD

"An Update on Glaucoma Clinical Trial"s - David Yang, OD

"The Five R's of an Optic Nerve Head Evaluation" - Ron Guiley, OD, MPH

"Visual Field Testing and Monitoring Glaucoma" - Thomas Callan, OD

"Glaucoma Treatment - Overview" - Carl H. Jacobsen, OD

"Glaucoma Medications and Treatments" - Ron Melton, OD, and Randall Thomas, OD, MPH

"Pharmacology of Glaucoma Drugs" - Christine Wildsoet, OD, PhD

"Normal Tension Glaucoma" - Ron Guiley, OD, MPH

"Surgical Management of Glaucoma" - Todd D. Severin, MD

The above 8-hour course and examination fulfills the part of the educational requirements for Glaucoma Certification as specified by SB 1406. In addition, it fulfills eight hours of TPA CE online education for optometric relicensure in California.

Regards,

Berkeley Online Lectures and Demonstrations

CE@BOLDoptometry.org

888-308-3128

www.BOLDoptometry.org

Attendance Certified by the University of California School of Optometry

Berkeley Online Lectures and Demonstrations

c/o UC Berkeley School of Optometry 302 Minor Hall University of California Berkeley, CA 94720-2020

The Berkeley Online Lectures and Demonstrations (BOLD) CE Program hereby certifies that the following optometrist completed the Glaucoma Continuing Education course and passed the exam given at the end of the course.

Name:

Opt. License No. (Calif.):

Michael S. Roth O.D.

Course:

24-hr Didactic Glaucoma Course - Part 3

Course Title:

"Cases and Considerations in Glaucoma"

Course Length:

8 hours of Continuing Education

Date:

November 30, 2011

"Glaucoma Pharmaceutical Considerations" - Jill Autry, OD, RPh

"Vision Changes with Age and Glaucoma" - Gunilla Haegerstrom-Portnoy, OD, PhD

"Glaucoma Cases" - Carl Jacobsen, OD

"Glaucoma Cases" - Frank Balestrery, OD, MS

"Glaucoma Cases" - Ron Guiley, OD, MPH

"Glaucoma Cases" - Ron Melton, OD, and Randall Thomas, OD, MPH

Regards,

Berkeley Online Lectures and Demonstrations

CE@BOLDoptometry.org

888-308-3128

www.BOLDoptometry.org

Attendance Certified by the University of California School of Optometry



STATE BOARD OF OPTOMETRY

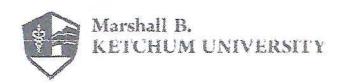
2450 Del Paso Road, Suite 105, Sacramento, CA 95834 P [916] 575-7170 F [916] 575-7292 web: www.optometry.ca.gov



CERTIFICATION OF PARTICIPATION IN CONTINUING EDUCATION

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NOTE: This <u>ENTIRE</u> form <u>MUST</u> be complete. Please <u>DO NOT</u> send any records of continuing education attendance to the board office unless requested to do so.





Letter of Adjunct Faculty Appointment Academic Year 2019-2020

On behalf of the administration and faculty of the Southern California College of Optometry at Marshall B. Ketchum University, I am pleased to offer you a contract as an Adjunct faculty member at the Southern California College of Optometry. This appointment is effective from July 1, 2019, through June 30, 2020. Renewal beyond this period shall require mutual consent of both parties to the contract.

Your faculty classification is Adjunct Faculty and your faculty rank is Assistant Professor.

Your specific assignments will be determined by the Dean of the Southern California College of Optometry (SCCO). Renewal beyond the contract term stated herein will require mutual consent of both parties to this contract.

This contract shall be governed by and subject to the current edition of the University Faculty Handbook.

As a clinical adjunct faculty member, you may not assert or maintain that you represent the University without prior approval of the President. It is, however, desirable and expected that you identify your academic affiliation with the University as a speaker at professional meetings and in professional publications.

As a condition to this contract you must be TPA state or site credentialed. Additionally, you are requested to submit an updated Curriculum Vitae and a copy of your Optometry License and/or Clinical Privileges, indicating certification to utilize Therapeutic Pharmaceutical Agents.

Please indicate your acceptance of the terms and conditions of this contract by signing your name and returning the original to the office of Clinical Education within one week of receipt.

Thank you for your dedication and contribution to the mission of So University.	CCO at Marshall B. Ketchum
It I be to the second	7-23-2019
Signature:	Date
Eni Brit	July 22, 2019
Signature: Interim Dean, Southern California College of Optometry	Date
Kevin L. alexander, OD, PhD	July 22, 2019
Signature: President Marshall R Ketchum University	Date

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STATE BOARD OF OPTOMETRY

2450 DEL PASO ROAD, SUITE 105, SACRAMENTO, CA 95834 P (916) 575-7170 F (916) 575-7292 www.optometry.ca.gov



Fee: \$35.00

Application for Glaucoma Certification

Authority: Business and Professions Code § (BPC) 3041(f)(5) and California Code of Regulations (CCR) §1571

* You must have a current California Optometrist License and have a Therapeutic Pharmaceutical Agent (TPA) Certification to be eligible for Glaucoma Certification

Name:		License #:	School/College Graduation Date: ICO / 1973		
Principal Place of Practice Address:		Phone #:			
City: State:	Zip:	E-mail Addr	ess:		
CA 3		CELLERE			
Please indicate the following:					
□ I graduated from an accredited school/college of optometry after May 1, 2000. Requirements: 1) Exempt from the 24-hour didactic course; and 2) Must complete the case management requirement (minimum of 25 individual patients are each prospectively treated for a minimum of 12 consecutive months). □ I graduated from an accredited school/college of optometry prior to May 1, 2000 and have completed the 24-hour didactic course. I began the glaucoma certification process between the dates of 1/1/2001 to 12/31/2009 pursuant to Senate Bill (SB) 929 (50 patients for two-years) but did not complete the requirements. Requirements: 1) May apply all patients who have been co-managed prospectively for 12 consecutive					
months toward the case management requirement. 2) Follow CCR §1571 glaucoma certification process if additional patients are needed to complete the case management requirement.					
☐ I graduated from an accredited school/college of optometry prior to May 1, 2000 and have not completed a 24-hour didactic course. Requirements: 1) Must complete the 24-hour didactic course; and 2) Must complete the case management requirement. ☐ I graduated from an accredited school/college of optometry prior to May 1, 2000 and have completed the 24-hour didactic course. Requirements: 1) Must complete the case management requirement.					
If you completed the 24-Hour Didactic Course ple	ease fill out the	e following:			
Please provide a copy of your certificate of completion wi *If you graduated after May 1, 2000, you are exempt and of		n.	mpletion: 2011		



STATE BOARD OF OPTOMETRY 2450 DEL PASO ROAD, SUITE 105, SACRAMENTO, CA 95834 P (916) 575-7170 F (916) 575-7292 www.optometry.ca.gov



M	ethod(s) used to complete the case management requirement:							
(A)	Case Management Course approved by the Board of Optometry on April 11, 2011. (A copy of your certificate of completion for this course <u>must</u> be attached to complete this application. This course may be completed only once for credit towards certification.)							
U	Grand Rounds Program approved by the Board of Optometry on April 11, 2011. (A copy of your certificate of completion for this course <u>must</u> be attached to complete this application. This program may be completed only once for credit towards certification.)							
П	Preceptorship Program effective January 8, 2011. (Please complete and attach the "Documentation of Co-Management of Glaucoma Patients for Preceptorship Program" form to complete this application.)							
	Applying 25 patients who have been co-managed prospectively for 12 consecutive months pursuant to SB 929, if you began the SB 929 glaucoma certification process between the dates of 1/1/2001 to 12/31/2009. (Please complete and attach the "Documentation of Co-Management of Glaucoma Patients for Preceptorship Program" form. You must use the most current form to complete this application.)							
pro I u	eclare under penalty of perjury under the laws of the State of California that the information ovided on this form and the attached documents or other requested proof of completion is true and inderstand and agree that any misstatements of material facts may be cause for denial of the successful cucoma certificate and disciplinary action by the Board of Optometry.							
Op	tometrist Signature: 1-23-2012							

02/04/2020



To Whom It May Concern:

In accordance with the requirements for glaucoma certification by endorsement in Nevada, I currently hold a Nevada-issued OPAC, hold an unrestricted ability in another jurisdiction (State of Arizona) to treat persons diagnosed with glaucoma, and have not been reported to the National Practitioners DataBank within the immediate last 5 years.

In addition, I attest that I have completed training that is substantially similar to the comanagement requirement for Nevada applicants. My experience is as follows: from July 1, 2018 through June 30, 2019 I completed an ocular disease/primary care residency at the Sierra Vista VA Community-Based Outpatient Clinic. The affiliated school was Marshall B. Ketchum University Southern California College of Optometry. During this 1-year period I received extensive training and experience treating many patients with glaucoma. On average I estimate that I saw about 3 patients/day with glaucoma. This amounts to 780 patient encounters involving glaucoma. While many of these visits were repeat patients, it is likely that I was involved with the management of well over 100 individual cases of glaucoma. Because I was located at a community-based outpatient facility, many of our patients were unable to travel regularly to the main hospital in Tucson where the ophthalmology department was located. Thus, I co-managed several patients (greater than 15) with ophthalmologists at the Tucson VA hospital, including many patients with advanced glaucoma during this 1-year period. I therefore submit this letter for your review as a testament that I have fulfilled the requirements for certification to treat and manage glaucoma in accordance with Nevada law.

Thank you,





My name is . I recently relocated to the state of Nevada in June 2019. I practiced optometry in the state of Utah from 2016-2019. During this time I was able to diagnose, treat, and manage glaucoma.

Before practicing in Utah, I gained experience with glaucoma throughout my schooling at MCPHS University and my clinical rotations. Below are my rotation/extern sites:

- VA Hospital Salt Lake City, Utah
- VA Hospital Tougas, Maine
- D'Ambrosio Eye Care Lancaster, Massachusetts
- MCPHS University- Family Health Center Worcester, Massachusetts
- Wachusett Family Eyecare West Boylston, Massachusetts
- Eye and Vision Center MCPHS University Worcester, Massachusetts
- Edward M. Kennedy Health Center Framingham, Massachusetts
- Family Health Center Providence, Rhode Island

Attached to this application:

- Proof of an active Utah Optometry License
- Proof of no disciplinary action for the Utah Optometry License and Controlled Substance
- Nevada TPA License

If any further proof is needed to receive my glaucoma certification, please don't hesitate to reach out to me.

Thank you,



From:

Admin

To:

Caren Jenkins

Subject:

FW: New submission from CE Summary Form 2020

Date:

Friday, March 13, 2020 9:56:20 AM

Importance:

High

Good morning Caren,

I've had no response from Dr.

regarding our inquiry.

Nancy Padilla Licensing Specialist

Nevada State Board of Optometry P.O. Box 1824 Carson City, NV 89702 Ph: (775)883-8367 Fax: (775)305-0105

www.nvoptometry.org

**** CONFIDENTIALITY NOTICE****

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From: Admin

Sent: Saturday, February 29, 2020 11:29 AM

To:

Subject: RE: New submission from CE Summary Form 2020

Importance: High

Dr.

We need to update our records. It appears by your renewal that you have started at

Meadows

Lane, # . When did you start at this location?

Sincerely,

Nancy Padilla Licensing Specialist

Nevada State Board of Optometry P.O. Box 1824 Carson City, NV 89702 Ph: (775)883-8367

Fax: (775)305-0105 www.nvoptometry.org

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NEVADA STATE BOARD OF OPTOMETRY \$ 750.00

2/20/20



CHEN K. YOUNG, O.D. Board President

MARIAH L. SMITH, O.D. Board Vice-President Post Office Box 1824
Carson City, Nevada 89702
Telephone: (775) 883-8367.
Facsimile: (775) 305-0105
E-Mail: admin@nvoptometry.org

JEFFREY K. AUSTIN, O.D. Board Member

DREW JOHNSON Public Board Member

CAREN C. JENKINS, ESQ.
Executive Director
cienkins@nvoptometry.org

APPLICATION FOR OPTOMETRY LICENSE RENEWAL

EACH OF THE FOLLOWING QUESTIONS MUST BE COMPLETED AND THE APPLICATION MUST BE SIGNED. FAILURE TO SUBMIT A COMPLETE APPLICATION WILL RESULT IN THE REJECTION AND RETURN OF YOUR RENEWAL DOCUMENTS.

State	In support o	f my applio by	cation for renev gnature at	39 (45)	ense to p	
herein	ĺ	best c	owledge an	u'	_	
1.	Are you curren	tly obligated	by Court Order for	the payment o	of child support?	□ Yes ☑ No
2.	If you answere child support?	그는 일이 이번 아이들이 그 아이는 그렇게 없는데	estion #1, are you □ No ØN/A	current in you	ır obligations und	er any Court ordered
3.		certification	, or have you volu			olined you, taken any number, allowed it to Yes No
4.	Have you <u>ever</u> disciplinary act		" [[n, DEA or a s	state drug enforce □ Yes ☑1	ement authority take No
	If yes, when an	d where?	Wighter			
5.	Prescribing:		•			
	50 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		ada TPA certificate vada PMP Accoun		390	⊠Yes □ No ⊠Yes □ No
FEB 8	My DEA# is: My CS# is:		_	□ N/A □ N/A		
(303); 1883	5		1			

6.	Have you been convicted of any drug or alcohol related offense by a Court of construction between March 1st, 2019, and the date of this application?	New York Washing
	If yes, when and where?	☐ Yes ∠No
7.	Do you have a State of Nevada business license? If "Yes," My State of Nevada business license number is The license is held under what name(s)?	□ Yes ⊅No
8.	Have you ever served in the Military?	□ Yes ⊅No
If"Ye	es," please provide your date(s) of service: FromTo	(DD-MM-YYYY)
Brand	(DD-MM-YYYY) ches of Service (Check all that apply) Army/Army Reserve Marine Corps/Marine Corps Reserve Navy/Navy Reserve Air Force/Air Force Reserve Coast Guard/Coast Guard Reserve National Guard	(DD-MM-YYYY)
	RENEW an ACTIVE LICENSE	
av.	Licence Number	155
Name	e:	_
Maill	ng Address.	nijeri in territori
	Phone:	
**********	The enclosed payment represents the \$750.00 license renewal fee for the 2020-2 year for my primary practice location at:	2022 license
	Phone: _ X:	
Ifyou	u are practicing in the State in more than one location, a renewal fee is assess	sed <i>per location</i> .
	I have included an additional \$200.00 to renew <u>each</u> of the additional practice localisted below for the 2020-2022 license year.	cations
	1	
	Phone:FAX:	
11/E	2	
589,		

	Phone:	FAX:	
	3		
		FAX:	
	4		
		FAX:	
ATTACH ADDIT	'IONAL SHEETS IF NECESSARY (PI	ease do not submit handwritten note	es)
Enclosed is m	y payment in the <u>total amount</u>	ofs_750	
My CE, as requi	red by the Board Policies, is being	submitted with this application.	
	D	ate: 2/20/2020	

The application for renewal, all fees, and all continuing education information must be received postmarked on or before February 29, 2020 to avoid the assessment of a late fee.

If any of the questions above are not completed, you have not included proof of completed continuing education, or you fail to sign the application, your application will not be processed.



From:

Admin

To:

Caren Jenkins

Subject:

FW: Nevada license renewal - Additional CE"s required.

Date:

Tuesday, March 3, 2020 10:58:41 AM

Forwarding correspondence with Dr. Corbridge.

From: drkjceyeguy@gmail.com [mailto:drkjceyeguy@gmail.com]

Sent: Tuesday, February 18, 2020 1:59 PM

To: Admin

Subject: Re: Nevada license renewal - Additional CE's required.

Dear Nevada Board,

Yes I wish to cancel my Nevada license. Please refund my \$500 to:

Desert Family Eye Center, PC 2187 Airway Ave Kingman, AZ 86409

Sent from my iPhone

On Feb 18, 2020, at 2:42 PM, Admin <admin@nvoptometry.org> wrote:

Dr. Corbridge,

The Optometry Board received a voicemail from your wife indicating that you would like to cancel your renewal application and request a refund. This email is being sent to confirm that your request for a refund has been received.

Sincerely,

Nancy Padilla Licensing Specialist

Nevada State Board of Optometry P.O. Box 1824 Carson City, NV 89702 Ph: (775)883-8367

Fax: (775)305-0105 www.nvoptometry.org

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message, please notify the sender by replying to this message and then delete it from your system. Use, dissemination, distribution or reproduction of this message by unintended recipients is not authorized and may be unlawful.

From: Admin

Sent: Tuesday, February 18, 2020 10:59 AM

To: drkjceyeguy@gmail.com

Cc: Caren Jenkins

Subject: RE: Nevada license renewal - Additional CE's required.

Importance: High

Dr. Corbridge,

My understanding in Nevada is that you cannot obtain a DEA number without first holding a TPA number. Your renewal application indicated a DEA number of MC0632679. I assumed that since you documented a DEA number on your application that you would need to submit 30 hours of CE's with two being in Opioids, Addiction care and/or Pain management.

You have submitted the correct number of CE's (18) to renew your license and I may go ahead and do so now. However, when we spoke on the phone you had said that you wanted to cancel you Nevada license and would like a refund of the fees submitted. Please let me know if you would like to renew your Nevada license.

Sincerely,

Nancy Padilla Licensing Specialist

Nevada State Board of Optometry P.O. Box 1824 Carson City, NV 89702 Ph: (775)883-8367

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From: Admin

Sent: Saturday, February 15, 2020 7:22 AM

To: drkjceyeguy@gmail.com

Subject: Nevada license renewal - Additional CE's required.

Importance: High

Good morning Dr. Corbridge,

I hope you are doing well. I've review your CE's for renewal and only 18 were submitted. You will need to submit an additional 12 more CE's as soon as possible to renew your license. Not more than 5 of the 12 can be in practice management.

Thank you and kind regards.

Nancy Padilla Licensing Specialist

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From: Caren Jenkins

Sent: Wednesday, March 18, 2020 9:11 AM

To: Caren Jenkins

Subject: FW: Telemedicine

Sent from Mail for Windows 10

From: msmith.od@gmail.com <msmith.od@gmail.com>

Sent: Sunday, March 15, 2020 10:31:47 AM
To: Caren Jenkins < cienkins@nvoptometry.org>

Subject: Telemedicine

Hi Caren,

With Coronavirus making patients cancel and no show for appointments, offices are considering closing for a few weeks. This may leave employees potentially unpaid for this time and leave emergent patient needs unaddressed.

With our upcoming meeting, and all the background work you've already done, I want to suggest the addition of telemedicine language to our law. I believe there is a way to do this outside of legislative session for emergencies, but of course you know all about that.

A useful Facebook post by Tom Cheezum, OD:

"Telemedicine Codes for Optometry. I just wrote the following information article on this subject.

Telemedicine Codes for Optometry

I'm sure many of you are having patients cancel appointments out of fear of the current Corona virus outbreak. Using the CPT codes for telemedicine, you may continue to provide care for patients who develop eye infections or other acute problems and bill for your services.

There are a few stipulations that you must follow in order to do this properly and meet the required CPT and HIPAA requirements.

- 1) The request for care must be initiated by the patient and the patient has to give verbal consent to receive care through a telemedicine consult.
- 2) THE SERVICE MUST BE PROVIDED THROUGH A HIPAA COMPLIANT SECURE PLATFORM AND MAY ONLY BE USED FOR ESTABLISHED PATIENTS
- 3) The telemedicine service can only be reported once during a seven day period. This means that if you have to consult with the patient again, regarding the same problem, during a period of seven days after the initial consult, you can't bill for another service. If the patient inquires about a new problem during the seven day period, you may bill for an additional telemedicine consult.
- 4) If you saw the patient in your office for a problem and billed for that visit and the patient initiates a telemedicine consult within seven days of that visit, you MAY NOT bill the telemedicine consult since it's

for the same problem.

- 5) If you use a telemedicine consult to address a patient initiated inquiry and you schedule an in office visit within 24 hours, or soonest available appointment, of that consult, you MAY NOT bill for the telemedicine consult.
- 6) The cumulative time for the telemedicine visit includes the time needed to review the initial inquiry/problem, time to review the patient record and the time to develop a management plan and ordering of any tests or prescriptions for treatment of the problem.
- 7) The service, including a note about verbal consent of the patient for the telemedicine care, pertinent clinical information, assessment and plan, along with the total time of the consult must be documented in the patient's record.

What constitutes a HIPAA compliant secure platform for telemedicine?

- 1) Skype, FaceTime, WhatsApp, regular email and texting ARE NOT HIPAA compliant because those services will not provide a Business Associate Agreement to providers.
- 2) The following are examples of HIPAA compliant platforms: A) Secure video or imaging available through your EHR patient portal
- B) eyecareLive
- C) Zoom for Business
- D) Doxy.me

(There are several other available platforms and the listing of these does not imply my recommendation of any specific way to do this but they are listed as readily available services)

The CPT codes are as follows:

99421 - 5-10 minutes of medical discussion

99422 - 11-20 minutes of medical discussion

99423 21-30 minutes of medical discussion

I hope that this information will be helpful to you during these difficult times and allow you to safely provide care to your patients at a time when many may be reluctant to come to your offices for service."

Thank you,

Mariah

Health Information Privacy

Notification of Enforcement Discretion for telehealth remote communications during the COVID-19 nationwide public health emergency

We are empowering medical providers to serve patients wherever they are during this national public health emergency. We are especially concerned about reaching those most at risk, including older persons and persons with disabilities. – Roger Severino, OCR Director.

The Office for Civil Rights (OCR) at the Department of Health and Human Services (HHS) is responsible for enforcing certain regulations issued under the Health Insurance Portability and Accountability Act of 1996 (HIPAA), as amended by the Health Information Technology for Economic and Clinical Health (HITECH) Act, to protect the privacy and security of protected health information, namely the HIPAA Privacy, Security and Breach Notification Rules (the HIPAA Rules).

During the COVID-19 national emergency, which also constitutes a nationwide public health emergency, covered health care providers subject to the HIPAA Rules may seek to communicate with patients, and provide telehealth services, through remote communications technologies. Some of these technologies, and the manner in which they are used by HIPAA covered health care providers, may not fully comply with the requirements of the HIPAA Rules.

OCR will exercise its enforcement discretion and will not impose penalties for noncompliance with the regulatory requirements under the HIPAA Rules against covered health care providers in connection with the good faith provision of telehealth during the COVID-19 nationwide public health emergency. This notification is effective immediately.

A covered health care provider that wants to use audio or video communication technology to provide telehealth to patients during the COVID-19 nationwide public health emergency can use any non-public facing remote communication product that is available to communicate with patients. OCR is exercising its enforcement discretion to not impose penalties for noncompliance with the HIPAA Rules in connection with the good faith provision of telehealth using such non-public facing audio or video communication products during the COVID-19 nationwide public health emergency. This exercise of discretion applies to telehealth provided for any reason, regardless of whether the telehealth service is related to the diagnosis and treatment of health conditions related to COVID-19.

For example, a covered health care provider in the exercise of their professional judgement may request to examine a patient exhibiting COVID- 19 symptoms, using a video chat application connecting the provider's or patient's phone or desktop computer in order to assess a greater number of patients while limiting the risk of infection of other persons who would be exposed from an in-person consultation.

Likewise, a covered health care provider may provide similar telehealth services in the exercise of their professional judgment to assess or treat any other medical condition, even if not related to COVID-19, such as a sprained ankle, dental consultation or psychological evaluation, or other conditions.

Under this Notice, covered health care providers may use popular applications that allow for video chats, including Apple FaceTime, Facebook Messenger video chat, Google Hangouts video, or Skype, to provide telehealth without risk that OCR might seek to impose a penalty for noncompliance with the HIPAA Rules related to the good faith provision of telehealth during the COVID-19 nationwide public health emergency. Providers are encouraged to notify patients that these third-party applications potentially introduce privacy risks, and providers should enable all available encryption and privacy modes when using such applications.

Under this Notice, however, Facebook Live, Twitch, TikTok, and similar video communication applications are public facing, and should <u>not</u> be used in the provision of telehealth by covered health care providers.

Covered health care providers that seek additional privacy protections for telehealth while using video communication products should provide such services through technology vendors that are HIPAA compliant and will enter into HIPAA business associate agreements (BAAs) in connection with the provision of their video communication products. The list below includes some vendors that represent that they provide HIPAA-compliant video communication products and that they will enter into a HIPAA BAA.

- Skype for Business
- Updox
- VSee
- · Zoom for Healthcare
- Doxy.me
- Google G Suite Hangouts Meet

Note: OCR has not reviewed the BAAs offered by these vendors, and this list does not constitute an endorsement, certification, or recommendation of specific technology, software, applications, or products. There may be other technology vendors that offer HIPAA-compliant video communication products that will enter into a HIPAA BAA with a covered entity. Further, OCR does not endorse any of the applications that allow for video chats listed above.

Under this Notice, however, OCR will not impose penalties against covered health care providers for the lack of a BAA with video communication vendors or any other noncompliance with the HIPAA Rules that relates to the good faith provision of telehealth services during the COVID-19 nationwide public health emergency.

OCR has published a bulletin advising covered entities of further flexibilities available to them as well as obligations that remain in effect under HIPAA as they respond to crises or emergencies at https://www.hhs.gov/sites/default/files/february-2020-hipaa-and-novel-coronavirus.pdf - PDF.

Guidance on BAAs, including sample BAA provisions, is available at https://www.hhs.gov/hipaa/for-professionals/covered-entities/sample-business-associate-agreement-provisions/index.html.

Additional information about HIPAA Security Rule safeguards is available at https://www.hhs.gov/hipaa/for-professionals/security/guidance/index.html.

Health/T.gov has technical assistance on telehealth at https://www.healthit.gov/telehealth.

Content created by Office for Civil Rights (OCR)

Content last reviewed on March 17, 2020

RESPONSE TO COVID-19

Learn More

















RESPONSE TO COVID-19

PROCLAMATION

WHEREAS, by Proclamation dated March 14, 2020, issued by Tate Reeves, Governor of the state of Mississippi, a state of emergency was declared pursuant to Miss. Code Ann. Section 33-15-11, in order to address the high risk of an outbreak of the novel coronavirus known as COVID-19, in the State of Mississippi; and

WHEREAS, the Proclamation invoked the emergency powers of the Governor pursuant to Miss .Code Ann. Section 33-15-11 (c) (1) to temporarily suspend or modify any rule or regulation of a state agency which would in any way prevent, hinder or delay necessary action in coping with the emergency; and

WHEREAS, the Mississippi State Board of Optometry, as an agency of the state of Mississippi wishes to comply with the Governor's proclamation and take those steps necessary to address access to needed optometric services/care to people in the state of Mississippi during this time of emergency; and

WHEREAS, the Mississippi State Board of Optometry recognizing that the COVID-19 situation continues to evolve and is communicating regularly with government officials to monitor developments of the outbreak recommend to optometrists that they delay referrals for elective surgical procedures and postpone all routine eye exams, for a two-week period—a routine eye exam visit may be defined by the doctor as it pertains to the patient's symptoms, diagnosis and treatment; and

NOW THEREFORE, until action is taken by the Governor of the State of Mississippi to lift the declared emergency, the Mississippi State Board of Optometry authorizes all optometrists to utilize telehealth to avoid unnecessary patient travel both in-state and out of state; the Board will not enforce any statute, rule or regulation against the optometrists who chooses to do so;

the recommended guidelines for such telehealth can be found in the Notification of Enforcement discretion for telehealth remote communications during the COVID 19 nationwide public health posted on msbo.gov.

FURTHER, except as specially stated herein, all other regulations remain in full force and effect.

SO ORDERED AND APPROVED by the Mississippi State Board of Optometry, this the

18th day of March 2020.

MISSISSIPPI STATE BOARD OF OPTOMETRY

Beverly Limbaugh, Executive Director

Proclamation (pdf)

Telehealth Guidelines

Telehealth Services HHS Guidelines (pdf)

License Verification

Rules & Regulations

Laws / Statutes

Online Renewal