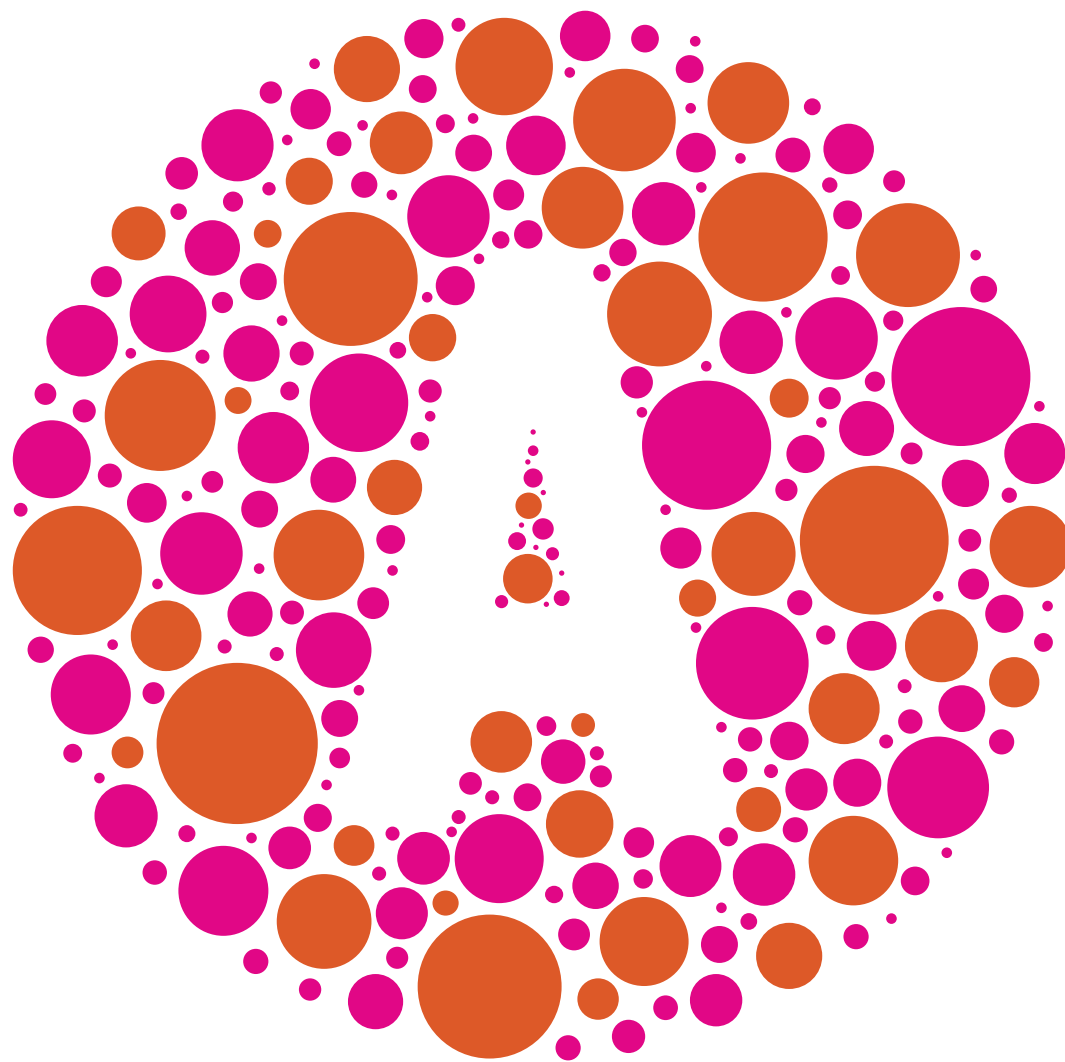
A portrait of Kimberly Ocampo, O.D., a woman with long, wavy brown hair and blue eyes, smiling warmly. She is wearing a bright pink blazer with black trim along the lapels and cuffs, over a black top. A large, ornate silver necklace is visible. The background features a pattern of colorful circles in shades of pink, grey, and orange.

“The more you get involved, the more clearly you’ll see the issues and the direct impact you’ll have.”

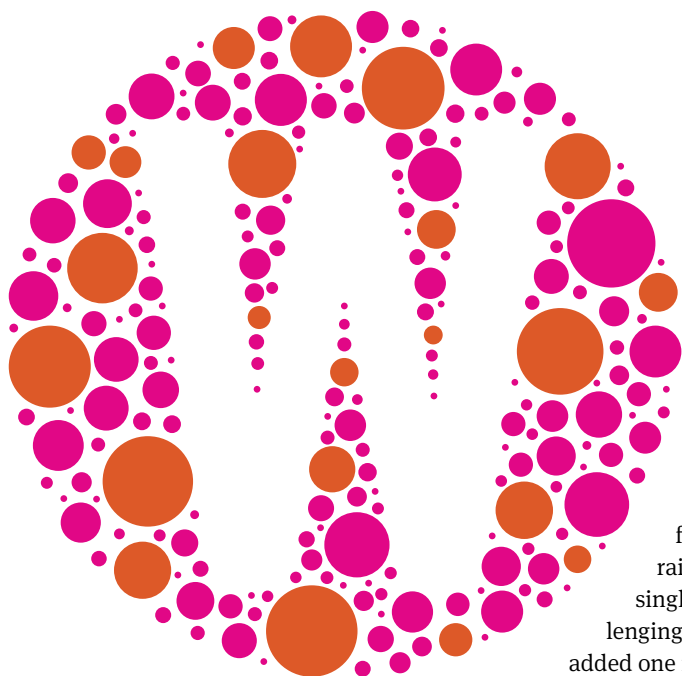
—Kimberly Ocampo, O.D.



OPTOMETRY'S ADVOCATES

Getting involved in advocacy efforts—and fighting for your patients and profession—is critical to ensuring optometry's priority issues are supported at the state and federal levels. But where do you start?

MELANIE PADGETT POWERS



When Kimberly Ocampo, O.D., began optometry school at the University of Alabama at Birmingham, her son, Alex, was 4 years old. Attending school full time while raising her son as a single mom was challenging, but Dr. Ocampo added one more responsibility to her never-ending to-do list: advocating for the optometric profession. As a member of the American Optometric Student Association Board of Trustees, she attended the AOA Congressional Advocacy Conference, where she had the opportunity to speak directly to U.S. senators and representatives about issues affecting optometry.

Despite the long days and numerous obligations, she knew advocacy was an important cause—both for her family and her profession. “I always felt like I was doing it for us and our future,” says Dr. Ocampo, who practices in Madison, Alabama. “Advocacy is every bit as important as continuing education and keeping up on the latest treatments.”

Dr. Ocampo continued her involvement, first joining the Alabama Optometric Association (ALOA) Student Affairs Committee and working her way up in leadership. Nine years after graduation, she is the ALOA immediate past president.

Advocating and educating lawmakers about optometry’s top state and federal priorities is critical to ensuring the concerns of patients and their doctors of optometry are addressed in laws and regulations.

Without committed advocacy efforts, scope of practice could shrink, health and vision plans could institute further restrictions and outside parties could infringe upon the profession. The AOA and its state affiliates encourage more doctors to become involved in grassroots advocacy through the AOA Federal Keyperson Program and by investing in the AOA Political Action Committee (AOA-PAC).

“Most everything you do from the time you open your practice in the morning to the time you go home at night—and even beyond that—is governed by federal or state legislation,” says D. Matthew Burchett, O.D., a member of the AOA State Government Relations Committee and a past president of the Kentucky Optometric Association.

It’s important for doctors to educate new graduates about the need for advocacy, he says. “A lot of them don’t realize all the other things that can happen through legislation that can impact them,” he says. “There’s always something going on you either have to speak for or against.”

Expanding the profession

Advocacy is not only important; it can be quite fulfilling, as you support your profession and help ensure your patients receive the best care possible, longtime advocates say.

Grassroots advocacy led to Kentucky’s doctors of optometry securing the ability to provide minor surgical procedures in 2011. And grassroots advocacy in Alabama in 2014 created a telemedicine law that prevents store kiosks from conducting auto refractions and providing consumers with a prescription without a doctor of optometry being involved. The law requires patients to have at least



one face-to-face meeting with their prescribing doctor.

In fact, the ability for doctors to own and manage their practices the way they do in 2016 owes much to advocacy, says Jeff Gonnason, O.D., a member of AOA's Federal Keyperson Program for the past 30 years and a past member of the AOA-PAC Board. Fifty years ago, doctors of optometry weren't allowed to prescribe drugs of any type. The first state to pass legislation to allow diagnostic pharmaceutical agents (DPA laws) was Rhode Island in 1971, with other states following suit. By 1989, all states had DPA laws, and by 1998, all states had therapeutic pharmaceutical agent laws. Doctors of optometry continued to fight against restrictions that tried to prevent them from selling eyeglasses or being reimbursed through Medicare.

"We're running against this discrimination all the time," Dr. Gonnason says. "Our scope of practice is based on what the state legislature says, and legislators often do not understand what we can do, so we must educate them."

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—Jeff Gonnason, O.D.

**“If we don’t
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—Whitney Jensen, O.D.



PHOTOGRAPHY BY KATHRYN GABLE

Getting involved

Doctors can get involved with advocacy at any stage of their career—whether they're a new graduate or have been practicing for three decades. Opportunities are abundant at both the state and federal level. (Read "How to Get Involved" on this page to learn more.)

Whitney Jensen, O.D., has spent the past year becoming more involved in Iowa after graduating in 2012. She practices in Grinnell, Iowa, with her dad, Clark Jensen, O.D., who has been active in advocacy during his 40 years of practice.

"It's interesting to hear some of the changes there have been since he's been in practice," she says. "I want to have the largest scope of practice that we can. I think we're heading in the right direction."

She jump-started her advocacy efforts by expressing her interest and requesting information from the Iowa Optometric Association Legislative Committee and then attending the 2015 AOA State Legislative and Third Party National Conference in Denver, Colorado, where she learned a lot about insurance coverage and payment policies. Next, she plans to join her state optometry PAC and explore advocacy opportunities at the national level.

"I want to get our message across," Dr. Jensen says. "There are other powerful governing bodies in other medical professions [advocating]. If we don't do anything and don't advocate for our profession, we're going to be restricted. If we don't give ourselves a voice, nobody is going to listen to us."

Developing a pipeline of advocates

Recruiting and mentoring new doctors for state and national advocacy efforts is a critical component of expanding and strengthening the

HOW TO GET INVOLVED

When Whitney Jensen, O.D., learned that her brother had a business partner who also is an Iowa state senator, she immediately planned to connect with him to discuss issues facing her patients and profession.

Reaching out to state legislators or congressional representatives and staff that you might already know is one way to begin your advocacy efforts.

After each election in Georgia, the Georgia Optometric Association (GOA) emails doctors of optometry a list of new and incumbent legislators to see which lawmakers they might know.

"It's often very interesting to find out which doctors know them in different capacities," says Bryan Markowitz, GOA executive director. "So when a bill does come up, we're often very active at getting that person to contact them. They'll often listen to them because they have an existing relationship."

Not all doctors know a legislator personally, but there are plenty of opportunities to get involved in advocacy at both the state and federal levels:

- 1 Call your state optometric association and/or the AOA federal advocacy staff to ask how you can get involved. "It's a daily effort to keep on top of things," Markowitz says. "We always, always, always welcome anybody who wants to get involved."
- 2 Volunteer to serve on a state or national committee or serve as a keyperson, which is a volunteer at the state or national level who serves as a critical conduit between an assigned legislator and the optometric profession.
- 3 Invest in the AOA Political Action Committee (AOA-PAC) and your state affiliate's PAC. (See "The Importance of PACs" on page 27.)
- 4 Attend AOA's annual Congressional Advocacy Conference in Washington, D.C. The 2016 conference will be April 17-19. For more information, visit aoa.org/CAC2016.
- 5 Call your representative's local office to volunteer. Begin to build a relationship by staying in contact, volunteering at the office and attending events such as town halls and fundraisers. "It's about getting to know them personally," says Jeff Gonnason, O.D., a longtime member of AOA's Federal Keyperson Program. "It helps to have a lot of energy and enthusiasm, not just for optometry but for all issues that the legislator is interested in."

> Learn more at aoa.org/advocacy. For more information on how you can get involved, contact Matt Willette, director of congressional relations in the AOA Washington Office, at 800.365.2219 or mwillette@aoa.org.

profession. Many longtime advocates in the baby boomer generation are retiring and scaling back on their volunteer leadership.

Dr. Jensen benefited from an obvious mentor in her father, but

other doctors of optometry also can develop mentor relationships. Dr. Burchett continues to learn about advocacy from his mentor, William T. Reynolds, O.D., who serves on the AOA Board of Trustees.

“Most everything you do from the time you open your practice in the morning to the time you go home at night—and even beyond that—is governed by federal or state legislation.”

—D. Matthew Burchett, O.D.

Dr. Burchett knows how important it is to pass the torch and expand the pipeline of doctors who will fight for patients and the profession. As the PAC chair for Kentucky, he spoke at the AOA State Legislative and Third Party National Conference about how to start a state grassroots network and how to meet with legislators and effectively convey your message. Three years ago, the Kentucky Optometric Association developed a leadership training program that teaches young doctors advocacy skills, the history of optometry in their state and how legislation affects the profession. About 10 to 15 doctors attend a six-session class each year. Nominations are accepted from other doctors or they can nominate themselves.

The Georgia Optometric Association (GOA) developed a similar program two years ago in which 5 to 7 doctors are selected to take part in a leadership program that includes participating in the state advocacy day at the state capital. This helped double attendance at the optometry day in 2015 to approximately 60 doctors, according to Bryan Markowitz, executive director of GOA.

But doctors of optometry don't need to wait until they are in practice to begin advocating for their profession. As Dr. Ocampo showed by early advocacy, students have an important role to play as well. She stressed this as the speaker at the UAB School of Optometry white coat ceremony in August 2015.





PHOTOGRAPHY BY JONATHAN WILLIS

THE IMPORTANCE OF PACS

The AOA Political Action Committee (AOA-PAC) is an effective political force in Washington, but it needs more doctors of optometry to join and continue the momentum.

AOA-PAC is a voluntary nonprofit, unincorporated committee of doctors of optometry. It is not affiliated with any political party or any other political committee. Many state affiliates have their own PACs as well, focusing on statewide optometric issues.

AOA-PAC supports U.S. Senate and House candidates who support optometry and AOA's priorities in Congress. While grassroots efforts are a critical component of advocacy, a PAC also is a necessary part of the political process. "It's your efforts to influence the legislative process," says Kimberly Ocampo, O.D., immediate past president of the Alabama Optometric Association. "The legislators are going to be influenced by someone. You need to be at the table."

Jeff Gonnason, O.D., a longtime member of AOA's Federal Keyperson Program, often hears people say, "But I hate politics." His response? "It's the way the rules are written, and we have no other choice but to play the game. If you are not at the table, you get left out, and if you get left out, it's hard to get back in."

For many people, the idea of a PAC is an abstract idea, Dr. Ocampo says. She encourages doctors to invest in their state and AOA federal PAC and learn more about the process and how they can increasingly help support critical optometric issues.

► [Learn more at aoapac.org.](http://aoapac.org)

When Markowitz speaks to optometry school classes, he encourages them not to be afraid to call the GOA. "Any day, any time, if you're available to come [to the capitol] ... I will walk you around and you can shadow us that day. I will show you a lot about the process and the day to day."

Longtime advocates stress that doctors should not be nervous contacting legislators' offices or championing optometric issues face to face.

"Do not feel intimidated by their office, as they are regular people, too," Dr. Gonnason says, "and often they are not as magnificently confident as they appear, and they appreciate truly helpful, supportive constituents."

Dr. Burchett reminds doctors of optometry that they—not the legislators—are the experts. "If you can talk to a patient in an exam room, you can do this," he says.

Developing relationships with

legislators and their staffers takes time, but building that trust is what is most effective when you want to educate the legislator on a particular issue. "At the end of the day, no matter what you're advocating for, it really comes down to personal relationships," Dr. Burchett says.

Dr. Ocampo encourages colleagues at all levels to get involved however they can. She reminds them that the AOA and its affiliates are the only organizations whose "sole reason for being is to protect the interests of patients and the doctors on which they rely."

"The more you learn, the more you'll be interested in," she says. "The more you get involved, the more clearly you'll see the issues and the direct impact you'll have."

Melanie Padgett Powers is a freelance health writer in the Washington, D.C., area.