

Before her marriage, Luci Johnson Nugent worked with a local optometrist from whom she had received visual training. I can't imagine that her father would have approved of her working for an optometrist located in a retail store ablaze with neon lights offering "discount price" glasses.

The "spec peddler" with his horse and buggy who travelled from town to town, a common sight in America in the late 1800's, belongs to history. The public has a right to expect contemporary vision care procedures just as it expects modern techniques and practices in other areas of health care.

Unfortunately the specs peddler did not go out with the 19th Century, he joined the 20th Century migration to the large cities. To the public's detriment, he merely changed his operation from a buggy to an attic or other low rent location and continued his eyeglass selling practices. The permanent spec peddler in many cases prospered because the unsuspecting public possessed little knowledge of what constituted proper vision care.

The object of the specs peddler, in whichever century he might operate, remains the same—sell glasses. The growing promotion of health benefits to unions provided the spec peddler additional sales outlets. Unions, attempting to provide additional services to their members, made arrangements with former spec peddlers (now termed optical companies or commercial optometrists) to "purchase complete single vision glasses at one low price of \$8.00 and complete bifocal glasses for \$13.00 . . . you will have your choice of more than 100 styles, shapes and colors to choose from. This should appeal to the ladies * * * glasses * * * are comparable and in many cases superior to those selling elsewhere for \$25.00 to \$45.00." The preceding is taken from a letter written on the stationery of a Chicago, Illinois, affiliate of the United Auto Workers Union. See attachment #6.

The District Optometric Society frequently receives complaints about optometrists working in the types of corporate enterprises I have described. To give you some idea of the complaints we receive, I am submitting attachment number 7. Other similar complaints from victims of these entrepreneurs were delivered for the records of this Committee following last year's hearings on H.R. 12937.

There are those in opposition to this bill who wish to claim that it will inhibit "third party" practice of optometry and thereby be injurious to those relying upon third parties for their vision care.

Mr. Chairman, the only prohibitions directed against "third parties" by this bill are directed against corporations or firms which would abuse the practice of optometry by making an ill-gained profit from the sale of merchandise in the guise of caring for the visual needs of the population.

Third parties such as hospitals, clinics, group health practices, non-profit health services, health expense indemnity corporations, agencies of government or employers providing optometric services solely to their employees are exempt from this proposed Act.

The bills which you are considering do not prevent the employment of optometrists. They would only prevent such employment where the primary motive is profit from the sale of eyeglasses. They do not prevent union welfare funds and centers from employing the services of optometrists providing the motive for employment is that of providing vision care services rather than a profit from the sale of products.

There are also arguments that a prescription would be required for the purchase of optical instruments such as binoculars, microscopes and telescopes. This Act does not regulate the sale of these devices. It regulates ophthalmic materials, not optical instruments.

There are a number of union optical plans operating across the country which are thought to be operating on a not-for-profit basis and which, we understand, are in fact franchises from an office in New York State. In these plans, optometrists serve in somewhat the same "captive" relationship as do those optometrists who are employed by, or are under contract to, commercially-motivated retailers which we have described as operating here in the District of Columbia. The working men and women of the District are, we believe, fortunate in the fact that none of the so-called "union optical plans" are active here, to the best of our knowledge. We have every reason to be fearful that union members in our city might be lured into seeking such franchised operations in the future, believing innocently that lower cost vision care is available through such a means. Lower cost in this instance means lowest-quality service and materials, and we believe this to be absolutely unconscionable in the health care field.