



Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City, Metro Manila



TWENTIETH CONGRESS
First Regular Session

House Bill No. 8553

Introduced by **Representative GIRLIE E. VELOSO**

EXPLANATORY NOTE

The 1987 Constitution commands the State to protect and promote the right to health of the people and to adopt an integrated and comprehensive approach to health development that makes health services available to all at affordable cost. That mandate now operates in a health system already reshaped by the Universal Health Care Act, which requires stronger primary care, coordinated provider networks, and more accessible frontline services. Eye care cannot remain outside that reform effort, especially when visual impairment continues to impose avoidable health, educational, and economic burdens on Filipino families.

The Revised Optometry Law of 1995 was enacted in a very different regulatory and health-system environment. It predates the Universal Health Care Act, the modern PhilHealth network model, telehealth, artificial intelligence-enabled clinical tools, and the current global shift toward competency-based health workforce standards. More importantly, it still reflects an older model of optometric practice and education as it hardcodes a dated curriculum structure, fixes a narrow list of diagnostic pharmaceutical agents in the statute itself, and does not provide a coherent legal framework for teleoptometry, therapeutic management, digital records, quality assurance systems, or modern public-health integration. In short, the current law is no longer merely old; it is structurally mismatched to the demands of present-day eye care.

That mismatch matters because the Philippine eye-care burden remains substantial. Research using data from the 2018 Philippine National Blindness Survey and Eye Disease Study reports a 1.98% prevalence of blindness and vision impairment, with cataract estimated at 1.11 million cases, uncorrected refractive error at 400,000, glaucoma at 300,000, maculopathy at 200,000, and around 4 million more people living with vision impairment due to undiagnosed causes¹. The same Philippine research registry also expressly notes that refraction, which is central to comprehensive primary eye care, is what optometrists do best, yet they are not formally included in the public

¹ Philippine Health Research Registry. Philippine National Blindness Survey and Eye Disease Study (2018) — Registry Entry and Research Summary.
<https://registry.healthresearch.ph/index.php/registry?cid=2580&layout=details&view=research>

health care system. This gap is not academic. It means delayed detection, delayed correction, avoidable learning barriers for children, reduced productivity for adults, and preventable progression of eye conditions that could have been managed earlier and closer to the community.

The policy direction of government itself already points toward the need for this reform. PhilHealth only recently began implementing a benefit package for optometric services for children aged 0 to 15 years, and that package works through referral and accredited optometric clinics². That recent development is important for two reasons. First, it shows official recognition that optometric services are legitimate health services and not merely retail transactions. Second, it also shows how limited existing coverage still is: if a new circular had to be issued in 2025 just to begin covering pediatric optometric services, then the larger legal architecture for integrating optometry into primary care and health financing is plainly incomplete.

At the same time, international standards have moved decisively toward a more modern understanding of eye-care delivery. The World Health Organization's Eye Care Competency Framework³ was developed precisely to help countries align eye-care workforce development with recognized competencies and population needs, while the World Council of Optometry⁴ defines optometry as an autonomous, educated, and regulated profession whose practitioners provide comprehensive eye and vision care, including refraction, detection and diagnosis, management of eye disease, and rehabilitation of visual-system conditions. These frameworks do not diminish the role of ophthalmology; rather, they recognize that modern eye care requires a layered and coordinated system in which frontline primary eye care is strong, safe, and properly regulated.

This bill responds directly to those realities. It repeals Republic Act No. 8050 and replaces it with a modern, coherent, and enforceable legal framework for the practice of optometry in the Philippines. It updates the statutory definition and scope of practice of optometry; strengthens the Professional Regulatory Board of Optometry; modernizes licensure, education, and ethical regulation; and introduces contemporary safeguards for teleoptometry, clinical records, patient safety, quality assurance, and digital practice. It also preserves the medical boundary by making clear that optometry remains distinct from the practice of medicine and that ocular surgery and medical practice remain outside optometric authority unless expressly authorized by law.

The bill is also designed to solve a specifically Philippine access problem: the underutilization of optometrists in the broader health system despite the country's continuing burden of preventable visual impairment. By enabling the integration of optometric services into primary care provider networks and by supporting the consideration of comprehensive eye examinations and other authorized optometric services in national health insurance benefit packages, the measure aligns eye care with the logic of Universal Health Care. This is not an attempt to displace other health

² Philippine Health Insurance Corporation. PhilHealth Circular No. 2025-0002: Implementation of the Optometric Services Benefit Package for Children Aged 0–15 Years.
<https://www.philhealth.gov.ph/circulars/2025/PC2025-0002.pdf>

³ World Health Organization. WHO Eye Care Competency Framework (2022).
<https://www.who.int/publications/i/item/9789240048416>

⁴ World Council of Optometry. About Optometry and Global Definition of the Profession.
<https://worldcouncilofoptometry.info/about-wco/>

professionals. It is an effort to place the right eye-care services at the right level of care, especially where public need is greatest and specialist access is most limited.

The bill likewise adopts a responsible modernization strategy by allowing regulated clinical innovation, including diagnostic pharmaceutical agents, therapeutic pharmaceutical agents within defined limits, certain oral medicines for common eye conditions subject to restricted lists and protocols, and minor non-surgical procedures within statutory and regulatory safeguards. At the same time, it requires structured referral, documentation, competency-based standards, and training or bridging education for currently licensed optometrists who wish to exercise the expanded clinical functions introduced by this Act. Matching expanded authority with defined training, supervision, and regulation is consistent with how other jurisdictions have approached expanded optometric therapeutics.

In practical terms, this measure will help build a stronger eye-care system for the Philippines. It will help bring eye care closer to communities, support earlier detection of refractive and ocular conditions, improve continuity between frontline eye care and specialist referral, modernize professional education and accountability, and reduce the structural mismatch between how optometry is currently regulated and how eye care is actually delivered in the twenty-first century. More importantly, it will finally treat eye care as what it is: an essential part of primary health care, public health, and universal health coverage, not a peripheral or purely commercial service.

In view of the foregoing, support for the enactment of this measure is earnestly sought.


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TWENTIETH CONGRESS
First Regular Session

House Bill No. **8553**

Introduced by **Representative GIRLIE E. VELOSO**

**AN ACT MODERNIZING THE PRACTICE OF OPTOMETRY, REPEALING FOR
THE PURPOSE REPUBLIC ACT NO. 8050 (REVISED OPTOMETRY LAW OF
1995), AND FOR OTHER PURPOSES**

Be it enacted by the Senate and House of Representatives of the Philippines in Congress assembled:

1 **SECTION 1. Short Title.** — This Act shall be known as the “Philippine Optometry
2 Modernization Act.”

3 **SECTION 2. Declaration of Policy.** — It is hereby declared the policy of the State to
4 recognize and strengthen optometry as an autonomous, educated, and regulated health profession
5 performing a defined role in primary eye care within the health system. Toward this end, the State
6 shall:

- 7 (a) promote equitable access to quality eye and vision care as part of primary health care;
8 (b) protect public safety through competency-based, evidence-informed standards of
9 education, licensure, and professional regulation;
10 (c) institutionalize structured referral and co-management pathways between optometrists,
11 ophthalmologists, and other health professionals to ensure continuity and
12 appropriateness of care;
13 (d) enable responsible clinical innovation, including the regulated use of diagnostic and
14 therapeutic pharmaceutical agents and modern technologies, subject to patient-safety
15 safeguards; and
16 (e) align optometry education, scope of practice, and professional standards with
17 contemporary scientific evidence and internationally accepted competency frameworks
18 for eye care.

SECTION 3. Definition of Terms. — For purposes of this Act, the following terms are defined as follows:

- (a) Optometry refers to the science and art of examining the human eye and analyzing ocular function for the purpose of preserving, restoring, or improving vision and eye health. It includes the conduct of comprehensive eye and vision examinations; the determination of refractive status; the prescription, fitting, and dispensing of ophthalmic lenses, prisms, contact lenses, low vision aids, and similar optical devices; the performance of vision training, orthoptics, and other non-invasive rehabilitative procedures; the detection, assessment, management, and referral of ocular and visual conditions within the scope of practice authorized under this Act; the use of authorized diagnostic pharmaceutical agents and therapeutic pharmaceutical agents; and the provision of preventive eye care and population-based eye health services.
- (b) Optometrist refers to a natural person who is duly registered and licensed to practice optometry under this Act.
- (c) Optometrist in Good Standing refers to a registered optometrist who holds a valid certificate of registration and a current professional license issued by the Professional Regulation Commission and who is authorized to practice optometry in the Philippines.
- (d) Comprehensive Eye and Vision Examination refers to a systematic evaluation of visual function, refractive status, binocular vision, and ocular health, including patient counseling, clinical documentation, and referral when clinically indicated.
- (e) Diagnostic Pharmaceutical Agents (DPA) refer to pharmaceutical substances authorized under this Act and its Implementing Rules and Regulations for use by optometrists in aid of ocular examination and diagnosis.
- (f) Therapeutic Pharmaceutical Agents (TPA) refer to pharmaceutical substances authorized under this Act and its Implementing Rules and Regulations for the treatment or management of specified ocular conditions by optometrists within the scope and limitations prescribed under this Act.
- (g) Teleoptometry refers to the delivery of optometric services through information and communications technology, whether synchronous or asynchronous, including remote triage, screening support, follow-up care, monitoring, and patient counseling, subject to the standards and limitations prescribed under this Act and its Implementing Rules and Regulations.
- (h) Optometric Clinic or Practice Setting refers to any facility, office, establishment, or digital platform where optometric services are rendered.
- (i) Ophthalmologist refers to a licensed physician who has completed postgraduate training in diseases and surgery of the eye and who is regulated under laws governing the practice of medicine. Nothing in this Act shall be construed to authorize optometrists to practice medicine or to regulate the practice of ophthalmology.
- (j) Commission refers to the Professional Regulation Commission (PRC).
- (k) Board refers to the Professional Regulatory Board of Optometry created under this Act.
- (l) Certificate of Registration refers to the document issued by the Professional Regulation Commission to a person who has successfully complied with the requirements for

1 licensure under this Act, signifying that the holder is duly qualified to practice
2 optometry in the Philippines.

3 (m) Professional License refers to the renewable Professional Identification Card issued by
4 the Professional Regulation Commission to a registered optometrist, indicating that
5 the holder is authorized to practice optometry during the period of its validity.

6 (n) Code of Professional Ethics refers to the set of ethical standards governing the
7 conduct, integrity, and professional responsibilities of optometrists, as adopted and
8 promulgated by the Board with the approval of the Commission.

9 **SECTION 4. Scope of the Practice of Optometry.** — Subject to licensure under this
10 Act and to the standards, limitations, and requirements prescribed herein and in the Implementing
11 Rules and Regulations, the practice of optometry shall include the following acts:

- 12 (a) conducting comprehensive eye and vision examinations using subjective and objective
13 procedures, instruments, and technologies for the purpose of determining visual
14 function, ocular condition, and refractive status;
- 15 (b) determining refractive status and prescribing, fitting, and dispensing ophthalmic lenses,
16 prisms, contact lenses, low-vision aids, and other optical devices and their accessories
17 and solutions for the correction or improvement of vision;
- 18 (c) assessing binocular vision, accommodation, and ocular motility, and performing ocular
19 exercises, vision training, orthoptics, and other non-invasive rehabilitative procedures
20 to correct or improve abnormalities of vision;
- 21 (d) detecting, assessing, and evaluating ocular and visual conditions and initiating
22 appropriate and time-bound referral or co-management pathways in accordance with
23 Board-approved clinical protocols;
- 24 (e) performing and interpreting optometric procedures, tests, and measurements within
25 demonstrated competency and authorized scope, including the use of instruments,
26 visual aids, and technologies for ocular assessment;
- 27 (f) providing preventive eye care, patient education and counseling, and eye-health
28 services aligned with public health programs and primary care delivery;
- 29 (g) using diagnostic pharmaceutical agents, as authorized under this Act and consistent
30 with standards and requirements prescribed by the Board, for the purpose of ocular
31 examination and diagnosis;
- 32 (h) using therapeutic pharmaceutical agents for the treatment or management of specified
33 ocular conditions, Provided, That such authority shall be limited to topical ocular
34 therapeutics within a Board-approved formulary and clinical protocols; shall exclude
35 ocular surgery, injections, and the use or prescription of controlled substances; and
36 shall be exercised only in accordance with the education, training, licensing, and
37 patient-safety requirements prescribed under this Act and its Implementing Rules and
38 Regulations;
- 39 (i) prescribing and administering oral medicines for common eye conditions, subject to a
40 restricted list, defined clinical indications, mandatory referral thresholds, and patient-
41 safety safeguards as may be prescribed by the Board in coordination with the
42 Department of Health and the Food and Drug Administration: Provided, That such
43 authority shall be limited to medicines necessary for the management of ocular

conditions within the optometrist's scope of practice and shall exclude systemic disease management and controlled substances;

- (j) performing minor, non-surgical office procedures related to eye care, the scope, limitations, training requirements, and safety standards of which shall be determined by the Professional Regulatory Board of Optometry through the Implementing Rules and Regulations: Provided, That such procedures shall not constitute the practice of medicine or ocular surgery;
- (k) installing prosthetic devices and providing rehabilitative measures necessary to restore or improve visual function;
- (l) maintaining accurate clinical records and participating in quality assurance, patient safety, and professional accountability systems as required by the Board;
- (m) participate in public health programs and primary care provider networks consistent with the Universal Health Care Act and other national health policies;
- (n) utilizing clinical decision support systems, including artificial intelligence-enabled tools, for screening, risk stratification, and clinical workflow support: Provided, That such tools shall not replace professional judgment and the optometrist shall remain professionally accountable for all clinical decisions, counseling, and referrals;
- (o) establishing and operating optometric clinics or offices and other lawful practice settings consistent with this Act; and
- (p) collecting professional fees for services rendered in the performance of the acts authorized under this section.

SECTION 5. Prohibition Against the Unauthorized Practice of Optometry; Medical Practice Boundary. — In order to clearly delineate the practice of optometry from the practice of medicine, prevent the unauthorized practice of the profession, and protect public safety, the following acts and limitations are hereby prescribed:

- (a) No person shall practice optometry as defined under this Act, nor perform any of the acts constituting the practice of optometry as provided in Section 4 hereof, without having first been duly registered and licensed to practice optometry in accordance with this Act and its Implementing Rules and Regulations.
- (b) Nothing in this Act shall be construed to prohibit a duly licensed physician from examining or treating diseases of the eye within the lawful practice of medicine, including physicians who have received postgraduate training in ophthalmology or other eye-related medical specialties.
- (c) The examination of the human eye by duly licensed physicians in the course of general medical or physical examination of patients shall not be considered the practice of optometry.
- (d) Public health workers who are duly trained and involved in government blindness prevention or vision screening programs may conduct visual acuity testing and basic vision screening, Provided, That such activities shall be limited to screening purposes and shall not include the diagnosis, prescription, or treatment of ocular conditions.
- (e) No optometrist shall perform ocular surgery or engage in the practice of medicine. Optometrists shall not perform invasive procedures except those expressly authorized under this Act and its Implementing Rules and Regulations and only in accordance with the standards, limitations, and patient-safety requirements prescribed therein.

- 1 (f) Optometrists shall comply with standardized referral and co-management protocols
2 issued by the Professional Regulatory Board of Optometry, including referral for
3 conditions that are sight-threatening, progressive, systemic in origin, or beyond the
4 optometrist's authorized scope of practice.

5 **SECTION 6. Teleoptometry and Digital Practice Standards.** — Teleoptometry and
6 other forms of digital optometric practice are hereby recognized as lawful modes of service delivery
7 within the scope of practice of optometry, subject to the same standards of care, professional
8 accountability, and patient-safety requirements applicable to in-person practice.

- 9 (a) A licensed optometrist may provide optometric services through teleoptometry and
10 other digital platforms within the scope of practice authorized under this Act, Provided,
11 That the standard of care is equivalent to that required for in-person services and that
12 professional judgment remains the responsibility of the optometrist.
- 13 (b) The Implementing Rules and Regulations shall prescribe minimum standards for
14 teleoptometry and digital practice, including but not limited to:
15 1. patient identity verification and practitioner authentication;
16 2. informed consent specific to teleoptometric services;
17 3. clinical documentation and records management;
18 4. data privacy, cybersecurity, and confidentiality safeguards in accordance with
19 applicable laws;
20 5. clinical limitations and circumstances requiring in-person examination or referral;
21 6. referral thresholds and escalation protocols; and
22 7. quality assurance, audit, and professional accountability mechanisms.
- 23 (c) Teleoptometry shall not be used as a substitute for in-person examination or evaluation
24 when physical examination is clinically indicated, nor shall it be employed to circumvent
25 standards of care, supervision requirements, or referral obligations under this Act.
- 26 (d) The use of digital tools, including clinical decision support systems and artificial
27 intelligence-enabled technologies, in teleoptometry shall not diminish the duty of care
28 owed by the optometrist, who shall remain fully accountable for all clinical findings,
29 decisions, counseling, and referrals.

30 **SECTION 7. Quality Assurance, Patient Safety, and Clinical Records.** — In order
31 to protect patients and ensure the quality and safety of optometric services, the following standards
32 shall govern professional practice under this Act:

- 33 (a) Optometrists shall maintain complete, accurate, and timely clinical records, which shall
34 include, as applicable, examination findings, diagnoses or assessments, prescriptions,
35 clinical decisions, informed consent, referrals, and follow-up instructions, in
36 accordance with standards prescribed by the Board and applicable laws.
- 37 (b) The Professional Regulatory Board of Optometry shall adopt and enforce minimum
38 patient safety standards, including but not limited to infection prevention and control,
39 device and instrument hygiene, medication safety, and the reporting and management
40 of adverse clinical incidents.

- 1 (c) For purposes of quality improvement and public protection, the Board may require
2 optometrists to participate in periodic clinical audit, peer review, or quality assurance
3 mechanisms, Provided, That such mechanisms shall be implemented in a manner
4 consistent with due process, confidentiality, and standards of fair professional
5 regulation.
- 6 (d) Failure to comply with quality assurance, patient safety, or records management
7 requirements prescribed under this Act and its Implementing Rules and Regulations
8 shall constitute a ground for administrative sanction, without prejudice to other
9 liabilities under existing laws.

10 **SECTION 8. Disclosure of Authority to Practice.** — In order to promote transparency,
11 protect patients, and ensure accountability in the delivery of optometric services, licensed
12 optometrists shall disclose their authority to practice in the manner prescribed under this section.

- 13 (a) Every licensed optometrist shall indicate his or her professional registration or license
14 number in prescriptions, professional documents, certifications, reports, and other
15 official records issued in the course of the practice of optometry.
- 16 (b) An optometrist shall display the certificate of registration issued by the Professional
17 Regulation Commission in a conspicuous place in the principal clinic or office where
18 he or she practices.
- 19 (c) In cases of teleoptometry or digital practice, the optometrist shall ensure that his or her
20 professional registration number and identity are clearly disclosed in electronic
21 prescriptions, digital records, or other electronic communications issued in connection
22 with professional services.
- 23 (d) The Board may prescribe additional standards for the proper disclosure of professional
24 authority in both physical and electronic practice settings.

25 **SECTION 9. Integration of Optometric Services into the Universal Health Care**
26 **System.** — Pursuant to the Universal Health Care Act (Republic Act No. 11223), the Department
27 of Health (DOH) and the Philippine Health Insurance Corporation (PhilHealth), in coordination
28 with the Professional Regulatory Board of Optometry, shall develop and implement mechanisms
29 for the integration of optometric services into the primary health care system. Such mechanisms
30 may include the accreditation of licensed optometrists and optometric clinics as part of primary
31 care provider networks and the consideration of comprehensive eye examinations and other
32 authorized optometric services for inclusion in national health insurance benefit packages,
33 consistent with applicable laws and regulations.

34 **SECTION 10. Creation and Composition of the Professional Regulatory Board of**
35 **Optometry.** — There is hereby created a Professional Regulatory Board of Optometry, hereinafter
36 referred to as the Board, under the administrative supervision and control of the Professional
37 Regulation Commission, composed of five (5) members consisting of a Chairperson and four (4)
38 Members.

1 The members of the Board shall be appointed by the President of the Philippines upon the
2 recommendation of the Commission from nominees submitted by accredited national professional
3 organizations of optometrists, in accordance with existing professional regulation laws.

4 **SECTION 11. Qualifications of Board Members.** – The Chairperson and Members of
5 the Professional Regulatory Board of Optometry shall possess the following qualifications:

- 6 (a) be a natural-born citizen of the Philippines and a resident thereof;
- 7 (b) be a duly registered and licensed optometrist in good standing under Philippine laws;
- 8 (c) be at least thirty-five (35) years of age at the time of appointment;
- 9 (d) be of good moral character and must not have been convicted of any crime involving
10 moral turpitude;
- 11 (e) have been engaged in the active practice of optometry, including clinical, academic,
12 research, or professional practice, for at least ten (10) years prior to appointment;
- 13 (f) not be an officer or trustee of any accredited professional organization of optometrists
14 during the term of office, and any person holding such position at the time of
15 appointment shall resign therefrom prior to assumption of office; and
- 16 (g) not have any direct or indirect financial or proprietary interest in any optometry school,
17 review center, clinic, or business engaged in the manufacture, distribution, or sale of
18 optical products or services: Provided, That any person possessing such interest shall
19 divest or relinquish the same prior to assumption of office.

20 The Chairperson and Members of the Board shall avoid conflicts of interest and shall be
21 subject to ethical and accountability standards prescribed under existing laws and the Implementing
22 Rules and Regulations of this Act.

23 **SECTION 12. Term of Office.** — The Chairperson and Members of the Professional
24 Regulatory Board of Optometry shall hold office for a term of five (5) years from the date of
25 appointment, or until their successors shall have been duly appointed and qualified.

26 Appointments to the Board shall be made in such a manner that the terms of office of the
27 members are staggered, so that the term of one member expires each year, thereby ensuring
28 continuity in the work of the Board.

29 The Chairperson of the Board shall be designated by the President of the Philippines at the
30 time of appointment.

31 Any vacancy in the Board occurring prior to the expiration of a member's term shall be
32 filled for the unexpired portion of the term only, in the manner provided under this Act.

33 **SECTION 13. Removal or Suspension of Board Members.** — Any member of the
34 Professional Regulatory Board of Optometry may, after due notice and hearing in an administrative
35 investigation conducted by the Professional Regulation Commission, be removed from office by
36 the President of the Philippines for neglect of duty, incompetence, malpractice, violation of this

1 Act or its Implementing Rules and Regulations, or for unprofessional, unethical, immoral, or
2 dishonorable conduct.

3 During the pendency of the investigation, the President of the Philippines may suspend the
4 member concerned for a period not exceeding sixty (60) days and may appoint a temporary
5 member to perform the functions of the office during such period.

6 **SECTION 14. Compensation of Board Members.** — The Chairperson and Members
7 of the Professional Regulatory Board of Optometry shall receive compensation, allowances, and
8 other benefits in accordance with existing laws, government compensation policies, and the rules
9 and regulations of the Professional Regulation Commission.

10 **SECTION 15. Powers and Functions of the Board.** — The Professional Regulatory
11 Board of Optometry shall exercise regulatory authority over the practice of optometry in the
12 Philippines and shall have the following powers and functions:

- 13 (a) promulgate the Implementing Rules and Regulations of this Act and adopt standards
14 governing the practice of optometry, subject to the approval of the Professional
15 Regulation Commission;
- 16 (b) administer licensure examinations for optometrists, determine examination subjects
17 and competency standards, adopt measures to ensure the integrity of the licensure
18 examinations, check and rate examination papers, and submit the results thereof to the
19 Commission;
- 20 (c) issue, suspend, revoke, reinstate, or renew certificates of registration and professional
21 licenses in accordance with this Act and applicable laws;
- 22 (d) adopt, enforce, and periodically update the Code of Ethics and professional practice
23 standards governing optometrists;
- 24 (e) investigate violations of this Act, its Implementing Rules and Regulations, and the Code
25 of Ethics; conduct administrative hearings; impose administrative sanctions; and
26 recommend the filing of criminal actions where warranted, subject to due process;
- 27 (f) administer oaths in connection with the implementation of this Act;
- 28 (g) issue subpoenas ad testificandum and subpoenas duces tecum in connection with
29 investigations conducted by the Board, and take appropriate action against persons who
30 obstruct or interfere with such proceedings, in accordance with applicable laws;
- 31 (h) maintain and publish an official registry of optometrists in good standing;
- 32 (i) conduct inspections of establishments, clinics, offices, and other facilities where
33 optometric services are rendered to ensure compliance with professional and regulatory
34 standards;
- 35 (j) issue orders to enjoin or abate the illegal practice of optometry by persons not
36 authorized under this Act;
- 37 (k) impose fines and administrative penalties, after due notice and hearing, for violations
38 of this Act and its Implementing Rules and Regulations;
- 39 (l) prescribe and maintain evidence-based standards, formularies, and clinical protocols
40 governing the use of diagnostic pharmaceutical agents, therapeutic pharmaceutical

- agents, and oral medicines authorized under this Act, in coordination with the Department of Health and the Food and Drug Administration;
- (m) establish standards and safeguards for teleoptometry, digital practice, and the use of clinical decision support systems, consistent with patient safety, data privacy, and professional accountability requirements;
 - (n) coordinate with the Commission on Higher Education, the Professional Regulation Commission, and other relevant agencies in monitoring, evaluating, and improving optometry education programs;
 - (o) evaluate periodically the status of optometric education and professional practice in the Philippines and recommend measures to maintain high professional and ethical standards; and
 - (p) perform such other functions as may be necessary to carry out the provisions of this Act.

SECTION 16. Quorum in Board Meetings. — The presence of three (3) members of the Professional Regulatory Board of Optometry shall constitute a quorum for the transaction of official business.

SECTION 17. Votes Required in Administrative Cases. — To render a decision in an administrative case involving violations of this Act, its Implementing Rules and Regulations, the Code of Ethics, or charges affecting the professional competence, fitness, or integrity of an optometrist, the affirmative vote of at least three (3) members of the Board shall be required.

Provided, That when any member of the Board is disqualified from participating in the proceedings by reason of relationship, conflict of interest, or voluntary inhibition, the Board may designate, with the approval of the Professional Regulation Commission, a duly registered optometrist in good standing, known for integrity and professional competence, to sit as a temporary member of the Board for the purpose of hearing, deliberating, and voting on the case.

SECTION 18. Supervision of the Board and Custody of Records. — The Professional Regulatory Board of Optometry shall be under the administrative supervision of the Professional Regulation Commission.

All official records of the Board, including but not limited to licensure examination records, examination papers, examination results, minutes of deliberations, administrative case records, investigation reports, registries of licensed optometrists, and other official documents, shall be kept, maintained, and preserved by the Commission in accordance with existing laws, rules, and records management policies.

The Commission shall provide the necessary administrative, technical, and secretariat support to the Board in the performance of its functions.

SECTION 19. Annual Report. — The Professional Regulatory Board of Optometry shall, at the end of each calendar year, submit to the Professional Regulation Commission an

1 annual report of its activities, proceedings, and regulatory actions during the preceding year,
2 including such statistical data, recommendations, and other information as may assist in the
3 improvement of optometric regulation and professional practice in the Philippines.

4 The Commission may require the Board to submit additional reports, information, or data
5 as may be necessary for the effective administration and regulation of the profession.

6 **SECTION 20. Licensure Examination.** — Every applicant seeking to be registered and
7 licensed as an optometrist shall be required to pass a licensure examination to be administered by
8 the Professional Regulatory Board of Optometry under the supervision of the Professional
9 Regulation Commission.

10 The licensure examination shall be given at least once every year on such dates and in such
11 places as may be designated by the Commission, upon recommendation of the Board.

12 **SECTION 21. Scope and Content of the Licensure Examination.** — The Professional
13 Regulatory Board of Optometry shall prescribe the scope and content of the licensure examination
14 and shall prepare the questions and other examination materials, subject to the supervision of the
15 Professional Regulation Commission.

16 In determining the coverage of the examination, the Board shall take into account current
17 developments in optometric science and clinical practice, as well as the academic standards and
18 curricular requirements prescribed by the Commission on Higher Education for optometry
19 education programs.

20 The licensure examination shall be designed to assess the applicant's knowledge, clinical
21 competence, ethical responsibility, and professional judgment necessary for the safe and effective
22 practice of optometry.

23 **SECTION 22. Qualifications for Admission to the Licensure Examination.** — To
24 be admitted to the licensure examination for optometrists, an applicant must possess the following
25 qualifications:

- 26 (a) be a citizen of the Philippines, or a foreign national who is allowed to take the licensure
27 examination and practice optometry in the Philippines in accordance with the
28 reciprocity provisions of existing laws governing professional regulation;
29 (b) be of good moral character and must not have been convicted of any crime involving
30 moral turpitude; and
31 (c) be a holder of the degree of Doctor of Optometry (O.D.) or its equivalent, conferred
32 by a school, college, or university recognized by the government and duly accredited
33 by the Commission on Higher Education, and which complies with the academic and
34 clinical training standards prescribed for optometry education programs.

1 **SECTION 23. Minimum Passing Rating.** — To successfully pass the licensure
2 examination for optometrists, a candidate must obtain a general average rating of at least seventy-
3 five percent (75%), with no rating below fifty percent (50%) in any examination subject or
4 component.

5 The Professional Regulatory Board of Optometry, subject to the approval of the
6 Commission, may prescribe the method of computation of ratings, weighting of examination
7 subjects or components, and other examination policies, consistent with the standards prescribed
8 under this Act.

9 **SECTION 24. Report and Release of Examination Results.** — The Professional
10 Regulatory Board of Optometry shall transmit to the Professional Regulation Commission the
11 ratings and examination results of all candidates within a reasonable period after the completion
12 of the licensure examination.

13 Upon receipt and verification of the results, the Commission shall officially release and
14 publish the names of the successful candidates in alphabetical order, without indicating their
15 respective ratings, through the official channels of the Commission. The Commission may
16 prescribe the procedures, timelines, and manner of publication of examination results, including
17 electronic or digital means.

18 **SECTION 25. Additional Requirement for Reexamination.** — Any applicant who
19 fails to pass the licensure examination for optometrists three (3) times shall not be permitted to
20 take the succeeding licensure examination unless the applicant submits proof of having completed
21 a refresher or remedial program in optometry from a school, college, or university recognized by
22 the government and duly accredited by the Commission on Higher Education, or such other
23 competency remediation program as may be prescribed by the Professional Regulatory Board of
24 Optometry with the approval of the Commission.

25 **SECTION 26. Oath of Optometrists.** — All successful examinees shall take their
26 professional oath before the Board or any person authorized to administer oaths prior to the
27 issuance of the certificate of registration and professional license, subject to the disqualification
28 provisions of this Act.

29 **SECTION 27. Disqualification for Registration.** — The following applicants may be
30 denied registration as optometrists:

- 31 (a) those who do not possess the qualifications prescribed under this Act;
32 (b) those who fail to pass the licensure examination for optometrists;
33 (c) those who have been convicted by final judgment of a crime involving moral turpitude
34 which, in the judgment of the Board, renders the applicant unfit to practice optometry,
35 taking into account the nature of the offense, the time elapsed since conviction, and
36 evidence of rehabilitation;

- 1 (d) those who, after due notice and hearing, are found by the Board to have engaged in
2 immoral, dishonorable, or unethical conduct affecting their fitness to practice the
3 profession; and
4 (e) those who have been declared by a competent court to be of unsound mind.

5 The Board shall communicate any finding of disqualification to the applicant in writing,
6 stating the reasons therefor, and such determination shall form part of the records of the Board.

7 **SECTION 28. Registration of Optometrists and Issuance of Professional License.**

8 — The Professional Regulation Commission shall register applicants who have successfully passed
9 the licensure examination, taken the professional oath, and complied with the requirements of this
10 Act, and shall issue to them a certificate of registration and a professional license authorizing them
11 to practice optometry in the Philippines.

12 The certificate of registration shall serve as prima facie evidence that the registrant is
13 qualified to practice optometry, while the professional license shall indicate the authority of the
14 registrant to engage in the practice of the profession during the period of its validity.

15 **SECTION 29. Revocation of Certificate of Registration and Suspension of**
16 **Professional License.** — The Professional Regulatory Board of Optometry may, after due notice
17 and hearing, revoke the certificate of registration or suspend the professional license of an
18 optometrist for any of the following causes:

- 19 (a) unprofessional, unethical, or dishonorable conduct;
20 (b) malpractice or gross incompetence in the practice of optometry;
21 (c) violation of any provision of this Act or its Implementing Rules and Regulations; or
22 (d) conviction by final judgment of a crime involving moral turpitude which, in the
23 judgment of the Board, renders the optometrist unfit to continue the practice of the
24 profession, taking into account the nature of the offense, the time elapsed since
25 conviction, and evidence of rehabilitation.

26 **SECTION 30. Appeals.** — The revocation of a certificate of registration or suspension
27 of a professional license by the Board shall become final unless appealed to the Professional
28 Regulation Commission within fifteen (15) days from receipt of the decision.

29 **SECTION 31. Reinstatement, Reissuance, or Replacement of Certificate of**
30 **Registration or Professional License.** — The Board may, upon application and for reasons
31 deemed proper, reinstate a suspended certificate of registration or professional license, or reissue
32 the same if previously revoked. In appropriate cases, the Board may require or dispense with
33 reexamination.

34 A new certificate may be issued to replace any certificate lost, destroyed, or mutilated,
35 subject to the rules prescribed by the Board.

1 **SECTION 32. Renewal of Professional License.** — Professional licenses shall be
2 renewed every three (3) years or such period as may be prescribed by the Commission, upon
3 compliance with the requirements prescribed by the Board and the Commission, including
4 continuing professional development and payment of the prescribed fees.

5 **SECTION 33. Technical Panel on Optometric Education.** — The Commission on
6 Higher Education, pursuant to Republic Act No. 7722, shall maintain a Technical Panel on
7 Optometric Education composed of senior practitioners, specialists, and academicians in the field
8 of optometry, including a representative from the accredited national organization of optometrists.

9 The Technical Panel shall advise the Commission on Higher Education on policies,
10 standards, and program development for optometric education, including:

- 11 (a) recommended curriculum and competency standards for optometry programs;
- 12 (b) faculty qualification and training standards;
- 13 (c) developments in optometric science, education, and professional practice relevant to
- 14 academic programs; and
- 15 (d) quality assurance policies for institutions offering optometry education.

16 **SECTION 34. Prohibited Acts.** — The following acts are prohibited:

- 17 (a) giving false, fraudulent, or forged evidence to the Board or the Commission for the
- 18 purpose of obtaining a certificate of registration, professional license, or other authority
- 19 under this Act;
- 20 (b) assuming, using, or advertising any title, description, or designation tending to convey
- 21 the impression that a person is a duly registered and licensed optometrist without
- 22 holding a valid certificate of registration and professional license under this Act;
- 23 (c) publishing or disseminating any false, misleading, or deceptive advertisement or
- 24 representation relating to the practice of optometry;
- 25 (d) using diagnostic pharmaceutical agents, therapeutic pharmaceutical agents, or oral
- 26 medicines without the authority granted under this Act, without the required training
- 27 or certification, or in violation of Board-approved formularies, protocols, or patient-
- 28 safety standards;
- 29 (e) performing any act constituting the practice of optometry without being duly registered
- 30 and licensed under this Act;
- 31 (f) aiding or abetting the unauthorized practice of optometry;
- 32 (g) interfering with or attempting to influence the professional judgment of a licensed
- 33 optometrist through sales quotas, revenue targets, commission-based incentives, or
- 34 similar commercial arrangements that prioritize financial gain over the patient's clinical
- 35 needs, or penalizing an optometrist for refusing to perform procedures or prescribe
- 36 products or services that, in the optometrist's professional judgment, are not clinically
- 37 indicated; and
- 38 (h) violating any provision of this Act or the rules and regulations issued for its
- 39 implementation.

SECTION 35. Penal Provisions. — Any person who commits any of the prohibited acts under this Act or violates any of its provisions shall, upon conviction, be subject to the following penalties:

- (a) **Unauthorized Practice of Optometry.** — Any person who practices optometry without being duly registered and licensed under this Act, or who falsely represents himself or herself as an optometrist, shall, upon conviction, be punished with imprisonment of not less than one (1) year but not more than five (5) years, or a fine of not less than Two hundred thousand pesos (P200,000) but not more than One million pesos (P1,000,000), or both, at the discretion of the court.
- (b) **Violation by Licensed Optometrists.** — Any licensed optometrist who violates the provisions of this Act, its Implementing Rules and Regulations, or the professional standards governing the practice of optometry shall be subject to administrative sanctions by the Board or the Commission, including reprimand, suspension, or revocation of the certificate of registration or professional license, and may be imposed a fine of not less than Fifty thousand pesos (P50,000) but not more than Five hundred thousand pesos (P500,000), without prejudice to criminal liability when warranted.
- (c) **Other Violations.** — Any person who commits acts prohibited under this Act which do not constitute unauthorized practice of optometry shall, upon conviction, be punished with a fine of not less than Fifty thousand pesos (P50,000) but not more than Two hundred thousand pesos (P200,000), or imprisonment of not more than one (1) year, or both, at the discretion of the court.
- (d) **Liability of Juridical Persons.** — If the violation is committed by a partnership, association, corporation, or other juridical entity, the responsible officers, directors, managers, or other persons who knowingly authorized or permitted the commission of the violation shall be held liable.
- (e) **Administrative Sanctions.** — The imposition of criminal penalties under this section shall be without prejudice to the administrative sanctions that may be imposed by the Board or the Commission under this Act.

SECTION 36. Foreign Reciprocity. — No foreign national shall be admitted to the licensure examination for optometrists unless the country of which he or she is a citizen allows Filipino optometrists to practice the profession on terms of reciprocity and substantial equality.

The Board, with the approval of the Professional Regulation Commission, may grant a special permit to a foreign optometrist to practice the profession in the Philippines for a limited period and for a specific purpose, including teaching, research, consultancy, or other professional services beneficial to the development of optometry in the country, subject to such conditions as may be prescribed.

The Board may likewise prescribe additional requirements for foreign applicants whenever similar requirements are imposed by the foreign country on Filipino optometrists seeking to practice therein.

1 **SECTION 37. Integrated Accredited Professional Organization of Optometris. —**

2 All optometrists duly registered under this Act shall be members of the Integrated Accredited
3 Professional Organization of Optometrists (IAPO), which shall be recognized by the Professional
4 Regulation Commission as the integrated national organization of optometrists.

5 Nothing in this Act shall prevent optometrists from organizing or joining other
6 professional associations, and membership in such other associations shall remain voluntary.

7 The IAPO shall advise the Board and the Commission in matters relating to:

- 8 (a) the promotion of professional ethics and standards of practice;
9 (b) continuing professional development and professional advancement;
10 (c) the formulation and dissemination of the Code of Ethics for the profession; and
11 (d) the development of programs that enable optometrists to effectively discharge their
12 professional and public responsibilities.

13 **SECTION 38. Membership Fees and Dues. —** Members of the Integrated Accredited
14 Professional Organization of Optometrists (IAPO) and of any other professional association of
15 optometrists may be required to pay reasonable membership fees and dues in accordance with the
16 constitution and bylaws of the respective organization.

17 Payment of such fees and dues shall entitle the member to the benefits and privileges
18 provided by the organization concerned, without prejudice to the authority of the Professional
19 Regulation Commission to regulate the practice of optometry under this Act.

20 **SECTION 39. Code of Professional Ethics. —** The Professional Regulatory Board of
21 Optometry shall adopt and promulgate a Code of Professional Ethics for the practice of
22 optometry, in consultation with the Accredited Professional Organization of Optometrists and
23 other relevant stakeholders.

24 The Code of Professional Ethics shall embody, among others, the following professional
25 principles:

- 26 (a) that the visual welfare and safety of the public shall be the optometrist's primary
27 responsibility;
28 (b) that optometrists shall maintain the highest standards of professional competence and
29 care;
30 (c) that optometrists shall continually improve their theoretical and practical proficiency;
31 (d) that professional services shall be rendered with fairness and without discrimination;
32 (e) that optometrists shall respect the confidential nature of patient information; and
33 (f) that optometrists shall refer patients for appropriate medical or other professional care
34 when the patient's condition requires services beyond the optometrist's competence or
35 scope of practice.

1 Violation of the Code of Professional Ethics shall constitute grounds for administrative
2 sanction under this Act, without prejudice to other liabilities under existing laws.

3 **SECTION 40. Transitory Provision.** — Optometrists duly registered and licensed prior
4 to the effectivity of this Act may continue to practice the profession under the authority granted
5 by existing laws.

6 The exercise of expanded clinical functions authorized under this Act, including the use of
7 therapeutic pharmaceutical agents and the prescribing of oral medicines, shall be subject to
8 completion of Board-approved competency training in ocular pharmacology and therapeutic
9 management, and such other requirements as may be prescribed in the Implementing Rules and
10 Regulations.

11 For this purpose, the Board, in coordination with the Commission on Higher Education,
12 the Department of Health, and relevant professional bodies, shall establish bridging education and
13 competency assessment programs to ensure that currently licensed optometrists are able to safely
14 perform the expanded functions authorized under this Act.

15 Optometrists who obtain their professional qualification under curricula aligned with this
16 Act shall be deemed to have satisfied such competency requirements.

17 **SECTION 41. Implementing Rules and Regulations.** — Within ninety (90) days from
18 the effectivity of this Act, the Professional Regulation Commission, in coordination with the
19 Professional Regulatory Board of Optometry and in consultation with the Department of Health,
20 the Commission on Higher Education, and the accredited national organization of optometrists,
21 shall promulgate the Implementing Rules and Regulations necessary to carry out the provisions of
22 this Act.

23 **SECTION 42. Appropriations.** — The amount necessary for the implementation of this
24 Act, including the operations of the Professional Regulatory Board of Optometry under the
25 Professional Regulation Commission and the activities of the Technical Panel on Optometric
26 Education under the Commission on Higher Education, shall be included in the annual General
27 Appropriations Act.

28 **SECTION 43. Separability Clause.** — If, for any reason, any section of this Act shall
29 be deemed unconstitutional or invalid, the other sections or provisions shall not be affected and
30 shall remain in force and in effect.

31 **SECTION 44. Repealing Clause.** — All laws, decrees, executive orders, rules and
32 regulations, or parts thereof inconsistent with the provisions of this Act are hereby repealed or
33 modified accordingly.

1 **SECTION 45. Effectivity Clause.** — This Act shall take effect after fifteen (15) days
2 from its publication in the Official Gazette or in at least two (2) newspapers of general circulation,
3 whichever comes earlier.

4 Approved.