



Why moving Optometry to the Physician's Pay Scale is necessary NOW!



Converting optometry to the physician's pay scale will make VA salaries more competitive with the private sector and help VA recruit for chronic and repeat vacant positions that are now advertised as low as \$66K. The physician pay scale was initially developed for physicians in the early 2000's to answer this same problem of disparity in pay. Eventually, dentists and podiatrists also recognized the importance of this scale, and each fought to be moved into the physician scale. We have been fighting for this for years to bring this change legislatively and we are finally at the table!

In conversations with multiple podiatrists, from frontline clinicians to regional and national leaders, they have all agreed that moving to market-based pay has been a positive for staff, clinics, and ultimately Veterans. The scale's purpose is to keep medical staff in the VA instead of driving them elsewhere, and none of the other professions have attempted to come back to optometry's current scale.

Optometry is now the only group of licensed, independent, prescribing practitioners not included on the physician's pay scale! In addition to solving the current recruitment and retention problems related to non-competitive pay, it will return optometry to the same category as these other professions, strengthening our collective position against unforeseen changes in the future.

Justifications for transitioning optometry to physician's pay:

1. VA optometry is facing unprecedented vacancies that compromise Veterans access to eye care.
2. Low salary cap causes experienced doctors of optometry to consider private sector offers.
3. The current pay structure advertises low starting salaries.
4. The current GS structure does not allow for increased compensation for the extra responsibilities and duties that come with supervisory/chief positions.
5. It creates disparity for rural and highly metropolitan clinics, which further distances the gap from the private sector.
6. The purpose of the physician/market base pay system is to make VA salaries more competitive, not to decrease them.
7. Pay will not be reduced due to limitations put in place in OPM regulations and US code. (see back)
8. All physicians (including optometrists) will be treated the same in regards to pay but according to that profession's unique qualification standards. Provisions in the bill determine those standards with professional stakeholder involvement. The "qual standards" will look different than what is currently in place, which will be more beneficial for pay advancement.
9. The current pay ranges of where most ODs would fall would be minimum \$115,587 and maximum \$243,000 on Pay Table 1. This is where General Dentistry and non-surgical Podiatry fall. Surgical Podiatry is on Pay Table 2. Minimum pay is the same but max is \$300k.

Lastly, we need to be unified in cause with these other professional groups! Being unified with these other healthcare providers strengthens optometry's positioning in the future.

We understand that with change, comes uncertainty; however, we are here to help work through those changes with you. You can help shape the future!

**Text VETERAN to 855-465-5124 and ask your legislators to
vote YES on HR 8371**

For the past 14 months, every measure and mechanism to ensure our Optometry Qual Standards and HR guidance from the Optometry Service Program Office are being employed to anticipate and prepare for changes to how pay is administered. This work was vitally important for dissolution of former typical functions of our Professional Standards Board and is continuing to evolve.

Decrease in pay was not the experience of Podiatrists when they were added to Physician Pay Administration. Below are a couple of items from the Handbook that address the concerns of pay decreasing during the conversion to the physician pay scale. Note: the policy overall is dated 2018 but the Market Pay points were updated in 2020. Plus, the maximum Tier was raised December 2023, and has not been published in the handbook.

From VHA Handbook 5007/54 Part IX PAY ADMINISTRATION: PAY FOR VHA PHYSICIANS, DENTISTS, AND PODIATRISTS

9. MARKET PAY

b. At least once every two years, the Secretary prescribes nationwide minimum and maximum amounts of annual pay (base pay plus market pay) that will be paid under this paragraph. These amounts are published in the Federal Register for not less than 60 days prior to the effective date. The Secretary may prescribe different ranges for different specialties or assignments. In determining pay ranges, at least two or more national surveys of pay for physicians and dentists are consulted. National surveys consulted include data that describes overall physician and dentist income by specialization or assignment and benefits in broad geographic scope. Annual pay ranges approved by the Secretary are available on the Office of Human Resources Management.

(1) When VA increases the nationwide minimum and/or maximum amounts of annual pay under this paragraph, physicians and dentists are not automatically entitled to a corresponding increase in their individual annual pay rates. Only physicians and dentists whose existing rate of annual pay falls below the newly prescribed nationwide minimum for their designated pay range will automatically receive an increase in market pay to make their annual pay rate equivalent to the new nationwide minimum. [The appropriate management official is responsible for reviewing] the market pay rates for individual physicians and dentists on a periodic basis under the provisions of paragraph 10.

(2) In the event that the nationwide minimum and maximum amounts of annual pay are reduced under this paragraph, physicians and dentists already on VA rolls will not experience a reduction in market pay.

10. MARKET PAY ADJUSTMENTS FOR INDIVIDUAL PHYSICIANS, DENTISTS [AND PODIATRISTS]

c. A market pay review cannot result in a reduction in market pay for a physician, dentist [or podiatrist] remaining in the same position or assignment at the same duty station, unless there is a change in board certification or reduction of privileges. Market pay may also be reduced upon change in assignment or as the result of a correction to the appointment action under the provisions of paragraph 7f.

Please note: if instances of transfer or new hires (this would fall into a different assignment or different position at a different/new duty station it is possible that to meet the "Time to Hire" benchmarks an individual could be brought in at the initial appropriate tier and Step 1 and then when the final market pay survey information from 2 sources is received by HR the Step level would be adjusted (increased from Step 1 appropriately) with retroactive pay.