

Department of Legislative Services  
 Maryland General Assembly  
 2020 Session

FISCAL AND POLICY NOTE  
 First Reader

House Bill 1375 (Delegate Hill)  
 Ways and Means

Public School Students - Vision Services and the Vision for Maryland Program

This bill establishes the Vision for Maryland program in the Maryland Department of Health (MDH) to provide eye examinations and (if necessary) eyeglasses to public school students who fail the required vision screening. Additionally, local boards of education and local health departments (LHDs) must provide eye examinations for specified students. The bill also creates a health specialist position in both the Maryland State Department of Education (MSDE) and MDH to ensure that quality and effective school health services are delivered throughout the State. **The bill takes effect July 1, 2020.**

Fiscal Summary

**State Effect:** General fund expenditures increase, likely significantly, in FY 2021 to provide eye examinations and eyeglasses to eligible students, but a reliable estimate is not feasible, as discussed below. General fund expenditures further increase by \$273,800 in FY 2021 to administer the program; future years reflect ongoing costs and elimination of one-time expenses. Revenues are likely not affected.

(in dollars)	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025
Revenues	\$0	\$0	\$0	\$0	\$0
GF Expenditure	273,800	249,800	255,600	264,300	273,200
Net Effect	(\$273,800)	(\$249,800)	(\$255,600)	(\$264,300)	(\$273,200)

*Note:() = decrease; GF = general funds; FF = federal funds; SF = special funds; - = indeterminate increase; (-) = indeterminate decrease*

**Local Effect:** Expenditures for local boards of education and LHDs increase significantly beginning in FY 2021 to provide eye examinations for eligible students and additional vision and hearing screenings, as required. Local revenues are not affected. **The bill imposes a mandate on a unit of local government.**

**Small Business Effect:** Potential minimal.

## Analysis

### Bill Summary:

#### *Vision for Maryland Program*

MDH must carry out the Vision for Maryland program in consultation with the Vision for Baltimore program, local boards of education, LHDs, and the Maryland Optometric Association.

The program must provide eye examinations to students who fail the required vision screening and eyeglasses, if determined necessary by the examination. These services must be provided (1) regardless of a family's ability to pay for them; (2) on the premises of the school in which the student is enrolled, or at another accessible location, but only if sufficient hours and transportation are provided; and (3) after the program receives written consent for the examination from the student's parent or guardian. If an eye examination determines that a student needs vision services that the program does not provide, the program must help the student's parent or guardian obtain the services, including at little or no cost to the student's parent or guardian.

MDH must develop (1) a fee schedule for the services or eyeglasses provided by the program based on a parent's or guardian's ability to pay and (2) standards for the administration of the fee schedule. The program may bill a student's insurance provider for the services or eyeglasses provided and charge a fee based on the schedule and standards developed by MDH. The program may receive funding from (1) State appropriations; (2) grants or other assistance from local education agencies and institutions of higher education; (3) federal grants; and (4) any other grants or contributions from public or private entities. The program must report on the number of students who received eye examinations, eyeglasses, or vision rehabilitation in the immediately preceding calendar year to specified committees of the General Assembly by January 1, 2022, and annually thereafter.

#### *Vision Screenings and Eye Examinations*

In addition to being provided in the year student enters a school system, vision screenings must be provided at least twice during grades 1 through 5 and at least once during grades 6 through 8, which changes the interval for the screenings and results in an additional screening being provided. The bill also applies this requirement to hearing screenings.

The results of a hearing and vision screening must be reported to both the local board of education and the LHD, and they must be shared with the student's primary care provider on request, with the written consent of the student's parent or guardian.

If a student fails the required vision screening, the student's parents or guardians receive notice of a failed screening, and the student has not received recommended services, each local board of education must ensure the student receives an eye examination and, if necessary, eyeglasses. A local board of education may coordinate with the Vision for Maryland program or any other public, private, or nonprofit entity to meet these requirements.

Additionally, each local board of education or LHD must provide a vision screening for a student in a public school who:

- has an individualized education program (IEP) or a 504 plan when (1) the program or plan is established or (2) the parent or legal guardian notifies the school that there is a specified change to the student's medical history;
- is identified as having problem behavior and is in need of a behavior intervention plan; or
- is not demonstrating grade-appropriate skill and content mastery and whose academic performance continues to decline despite intervention by the school.

### *Health Specialists*

The health specialists in MSDE and MDH must (1) develop the infrastructure for and collect, analyze, and respond to data trends concerning student health services in public schools; (2) ensure that students receive necessary vision and auditory examinations, eyeglasses, and hearing aids; and (3) ensure that quality and effective school health services are delivered throughout the State.

Funding for the positions must be from (1) funds allocated based on the recommendations of the Commission on Innovation and Excellence in Education (better known as the Kirwan Commission); (2) new federal revenues; or (3) non-State grants.

### **Current Law:**

#### *Required Hearing and Vision Screenings*

Each local board of education or LHD must provide hearing and vision screenings for all students in local public schools, and each LHD must provide and fund the screenings for

private and nonpublic schools in the jurisdiction. Unless evidence is presented that a student has been tested within the past year, the screenings must take place in the years that a child enters a school system, enters the 1st grade, and enters the 8th or 9th grade. Further screenings must be done in accordance with the bylaws adopted by the State Board of Education or policies adopted by a local board of education or LHD. A student whose parent or guardian objects in writing to a hearing or vision screening on religious grounds may not be required to take the screening.

Results of screenings go in each child's permanent record and are reported to the local board of education or LHD. Additionally, the parents or guardians of each student must be provided with the results of the hearing and vision screenings, regardless of whether the student passes or fails the screenings, as well as educational materials that include (1) a disclaimer that a vision screening is not a substitute for a comprehensive eye examination; (2) an overview of visual impairments and an explanation of the potential educational impact of untreated visual impairments; and (3) a list of at-risk groups that are encouraged to have a comprehensive eye examination.

Additional information must be provided to the parents or guardians of a student who fails the vision screening that includes (1) notice that the results of the screening indicate that the student may have a vision disorder; (2) a recommendation that the student be tested by an optometrist or an ophthalmologist; (3) a description of the warning signs, symptoms, risk factors, and behavioral problems associated with vision disorders or eye conditions; (4) a description of the difference between eye examinations and vision screenings; (5) information on how to enroll in Medicaid; and (6) information on locally available free or low-cost programs that provide eye examinations and eyeglasses for children, if any.

The parent or guardian of a student who does not pass a screening must report on the recommended services received by the student, and the report must be submitted on a form provided by the local board of education or LHD. The local board of education or LHD must report the results of screenings and the number of students receiving recommended services to MDH. MDH is required to (1) review hearing and vision screening reports from local boards of education and LHDs and (2) in counties where fewer than 50% of students who have failed the screenings are receiving recommended services, coordinate with the local board of education or LHD to implement measures to improve the number of students receiving the recommended services.

### *Individualized Education Programs*

The federal Individuals with Disabilities Education Act (IDEA) requires that a child with disabilities be provided a free appropriate public education in the least restrictive environment from birth through the end of the school year in which the student turns 21 years old, in accordance with an individualized family service plan (IFSP) or

IEP specific to the individual needs of the child. An IFSP is for children with disabilities from birth up to age 3, and up to age 5 under Maryland's Extended IFSP Option if a parent chooses the option. An IEP is for students with disabilities age 3 through 21. Local school systems are required to make a free appropriate public education available to students with disabilities from age 3 through 21. However, the State, under its supervisory authority required by IDEA, has the ultimate responsibility for ensuring that this obligation is met.

### *504 Plans*

Under [Section 504 of the federal Rehabilitation Act of 1973](#), an organization that receives federal money, including public and many private schools, may not discriminate against a person on the basis of a disability. Section 504 requires schools to make a “reasonable accommodation” for students with disabilities to allow them to participate in school and school-related activities. Section 504 plans can be created to help students with disabilities receive accommodations that are not covered by their IEP. Students with disabilities who do not need an IEP may still receive accommodations through a Section 504 plan.

For example, a student who has diabetes may have a Section 504 plan that includes a schedule for getting medication. A student who uses a wheelchair may have a Section 504 plan that provides for special transportation during field trips.

### *Behavior Intervention Plans*

A “behavior intervention plan” is a proactive plan designed to address problem behavior exhibited by a student in the education setting through the use of positive behavioral interventions, strategies, and supports.

**Background:** Vision screenings are provided by either the local board of education or LHD, depending on the jurisdiction. LHDs conduct screenings in all but four jurisdictions. In one jurisdiction, the local school system contracts with a local hospital to perform the screenings. Vision screenings test for myopia, color vision, and depth perception. These routine screenings do not test all visual skills or for symptoms of visual disorders.

The American Academy of Ophthalmology (AAO) [advises](#) that good vision is key to a child's physical development, success in school, and overall well-being. The vision system is not fully formed in babies and young children, and equal input from both eyes is necessary for the brain's vision centers to develop normally. If a young child's eyes cannot send clear images to the brain, his or her vision may become limited in ways that cannot be corrected later in life. However, if problems are detected early, it is usually possible to treat them effectively. AAO [notes](#) that some symptoms of vision problems are not obvious. For example, a vision problem could result in a child having a short attention span, losing

his or her place when reading, avoiding reading and other close activities, and turning his or her head to the side.

Vision for Baltimore is a partnership between the Baltimore City Health Department (BCHD), Johns Hopkins University, Vision to Learn (VTL), and Warby Parker. For students who do not pass the vision screenings provided by BCHD, the program provides, with the consent of a parent or guardian, an eye examination in VTL's mobile vision clinic, which goes to the school. Students who need eyeglasses pick the style and color of their frames in the mobile clinic. The eyeglasses are manufactured by eyewear provider Warby Parker and delivered to students in their schools. All services are available regardless of ability to pay, and parents are not charged.

Medicaid provides coverage for children's eye examinations and glasses every two years.

### *Commission on Innovation and Excellence in Education*

The Commission on Innovation and Excellence in Education, chaired by former University of Maryland Chancellor Dr. William "Brit" Kirwan, was established by Chapters 701 and 702 of 2016 to (1) review and recommend any needed changes to update the current education funding formulas (known as the Thornton formulas) and (2) make policy recommendations that would enable Maryland's preK-12 system to perform at the level of the best-performing systems in the world. The commission's final recommendations, including proposed funding formulas, were delivered in January 2020 and are known as the Blueprint for Maryland's Schools.

Legislation has been introduced in the 2020 session (Senate Bill 1000/ House Bill 1300) to implement the full set of policy and funding recommendations of the commission that will encompass the Blueprint for Maryland's Future (the Blueprint). Under the proposed legislation, the Blueprint would, beginning in fiscal 2022, substantially alter State aid and State policy for public schools. However, the proposed legislation does not include dedicated funding for new health specialist positions in MSDE or MDH.

### **State Expenditures:**

#### *Costs to Provide Eye Examinations and Eyeglasses for Eligible Students*

General fund expenditures increase, potentially significantly, but a reliable estimate is not feasible due to several unknown factors in the bill. During the 2017-2018 school year, 38,628 students failed a vision screening; it is estimated that one-third of those students (12,876) require an eye examination and eyeglasses under the bill. The cost per student of an eye exam and eyeglasses is approximately \$127, based on several Medicaid billing codes. However, the bill allows the Vision for Maryland program to (1) bill insurance

companies (including, presumably, Medicaid) and (2) collect fees from families on a sliding scale. As it is not known how many children have existing insurance coverage for eye examinations and eyeglasses, or how much will be collected in fees, a reliable estimate of the cost of providing eye examination services and eyeglasses cannot be made, but the cost is likely significant. *For illustrative purposes only*, if 25% of students who need an eye examination and glasses do not have insurance coverage and cannot afford to pay anything for the services, the total cost would be approximately \$409,000 (general funds) in fiscal 2021.

To the extent that the program increases or accelerates Medicaid claims for children's eye examinations and eyeglasses, general and federal fund expenditures increase to cover those costs beginning in fiscal 2021 (and federal matching fund revenues increase accordingly), but a reliable estimate is not feasible.

This estimate does not reflect any additional costs associated with providing the examinations on the premises of the school where the student is enrolled, or to provide transportation to an alternative location, as required by the bill. To the extent that MDH must purchase equipment or mobile units, expenditures increase by significantly more in fiscal 2021, with ongoing maintenance costs in future years. However, some nonprofit organizations provide mobile examinations; therefore, MDH may not need to purchase such equipment.

#### *Administrative Expenses*

The bill requires the two health specialist positions to be funded with funds allocated under the Blueprint or with other specified federal or non-State funds. As there are no funds provided in the Blueprint legislation as introduced, and it is not known what other fund sources might be available, this analysis assumes that the two positions are initially funded with general funds. To the extent that other funds become available, general fund expenditures may be less.

General fund expenditures for MDH increase by \$171,445 in fiscal 2021, which accounts for the bill's July 1, 2020 effective date. This estimate reflects the cost of hiring one health specialist, as required by the bill, and a program manager for MDH to (1) coordinate with specified partners; (2) manage program finances and maximize existing available services; and (3) track services provided, evaluate program effectiveness, and prepare the required annual report. It includes salaries, fringe benefits, one-time start-up costs, and ongoing operating expenses.

Positions	2
Salaries and Fringe Benefits	\$156,395
Other Operating Expenses	<u>15,050</u>
<b>Total MDH FY 2021 Administrative Expenditures</b>	<b>\$171,445</b>

Future year expenditures reflect annual increases and employee turnover and ongoing operating expenses.

General fund expenditures for MSDE increase by \$102,308 in fiscal 2021, which accounts for the bill’s July 1, 2020 effective date. This estimate reflects the cost of hiring one health specialist to coordinate with MDH’s health specialist as required by the bill. It includes a salary, fringe benefits, one-time start-up costs, and ongoing operating expenses.

Position	1
Salary and Fringe Benefits	\$94,783
Operating Expenses	<u>7,525</u>
<b>Total MSDE FY 2021 Expenditures</b>	<b>\$102,308</b>

Future year expenditures reflect annual increases and employee turnover and ongoing operating expenses.

**Local Expenditures:** Some LHDs and local boards of education already provide vision services for students. For example, as mentioned above, Baltimore City has the Vision for Baltimore program, which the Baltimore City Public Schools advises exceeds the standards set forth under the bill.

However, many LHDs and local boards of education only provide vision screenings, not eye examinations. For any county that does not provide eye examinations, expenditures increase, potentially significantly. *For illustrative purposes only*, local expenditures increase by at least \$704,445 annually, beginning in fiscal 2021 to provide eye examinations to eligible students. This estimate is based on the following information and assumptions:

- Although not specified, it is assumed that these examinations are provided free of charge to eligible students.
- Based on several Medicaid billing codes, an eye examination costs approximately \$67.09.
- According to MSDE’s 2018 *Maryland Report Card*, there were approximately 33,000 students with 504 plans, and 103,300 students with IEPs in 2018.

- The bill does not require an initial examination for *all* 136,300 students with an IEP or 504 plan in the first year, but rather only when the IEP or 504 plan is established or the school is notified of a specified change in the student's medical history.
- Assuming an estimated 1/13 of IEPs and 504 plans are established annually, local boards of education and LHDs must provide an eye examination to approximately 10,500 students each year.
- This estimate does not reflect the number of students who have been identified as needing a behavior intervention plan or the number of students who are not demonstrating grade-appropriate skill and content mastery and whose academic performance continues to decline despite intervention by the school, as this information is unknown.
- This estimate also does not account for eligible students who attend school in a jurisdiction that already provides eye examinations, as this information is unknown.

The bill also results in additional screenings being provided by each local board of education or LHD. Specifically, a vision screening must be provided for each student who has an IEP or a 504 plan when the program or plan is established or the parent or legal guardian notifies the school that there is a specified change to the student's medical history, as well as students in need of a behavior intervention plan, and specified students who are not demonstrating grade-appropriate skill and content mastery. In addition, modification of the timeframe for the provision of hearing and vision screenings for all students in public schools results in an additional set of screenings being provided. Accordingly, costs increase for local boards of education and LHDs for these screenings as well.

The bill also likely results in increased administrative costs for local boards of education and LHDs to coordinate with MDH to provide the required services under the bill.

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### **Additional Information**

**Prior Introductions:** None.

**Designated Cross File:** None.

**Information Source(s):** Maryland Association of County Health Officers; Maryland State Department of Education; Maryland Department of Health; Baltimore City Public Schools; Montgomery County Public Schools; St. Mary's County Public Schools; Department of Legislative Services

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