



HB1233: Health and Vision Services – Required Screenings and Eye Examinations **Creating a more cost-efficient vision screening system**

My name is Catherine Carter. I am a vision and student behavioral health advocate who works on policy and legislative change to improve identification of behavioral health needs and access to healthcare. I am also Project Manager of the [Howard County “Beyond 20/20” Program](#). Since 2017, I have been advocating to fix the screening system that failed to identify my son Atticus’ double vision and allows too many Maryland students to needless struggle because they lack access to vision care. I am asking for a favorable vote for HB1233 to create a more cost-effective vision screening system for our students so they can see to learn.

School year	Vision Data					Hearing Data				
	#Screened	#Referred	%	#followup	%	#Screened	#Referred	%	#followup	%
2016-2017	289,666	42,812	14.8%	13,196	30.8%	268,402	8,862	3.3%	1,902	21.5%
2015-2016	301,933	38,764	12.8%	13,488	34.8%	294,306	8,717	3.0%	2,145	24.6%
2014-2015	284,727	29,477	10.4%	12,039	40.8%	277,551	6,253	2.3%	2,388	38.2%
2013-2014	280,103	35,829	12.8%	13,951	38.9%	246,128	8,270	3.4%	2,997	36.2%
2012-2013	268,858	35,361	13.2%	14,674	41.5%	264,583	7,549	2.9%	3,258	43.2%
2011-2012	272,898	35,495	13.0%	14,700	41.4%	262,430	7,803	3.0%	3,167	40.6%
2010-2011	229,459	29,643	12.9%	11,930	40.2%	217,321	6,944	3.2%	3,000	43.2%

Current Mass Screening System:

- Screening entry to school (usually kindergarten), first grade, 8th/9th grade
 - This is a significant gap in screenings
 - Missing the critical grade when most students develop common vision impairments like myopia that screenings can catch.
 - My daughter Belleadora has significant myopia. She can’t see hardly anything without her glasses, which include bifocals. We are glad we caught early enough to prevent it from getting worse.
 - “People with myopia can have difficulty clearly seeing a movie or TV screen, a whiteboard in school or while driving. Generally, myopia first occurs in [school-age children](#). Because the eye continues to grow during childhood, it typically progresses until about age 20.” ([AOA](#)).
- Atticus Act information given to parents at screening
 - Screening not an eye exam
 - Signs and symptoms and at-risk groups for vision disorders
 - Vision care resources
- Only reporting on average a 34% eye exam follow up for over 35K students who fail a screening

Significant cost for current system that reports on average only 34% eye exam follow up:

- **Special education teams are using outdated, limited vision screenings when identifying disabilities**
 - [Ohio study](#) found that “out of the 179 that required treatment, 124 (69%) of the children with IEPs would have passed the school vision screening test. That is to say, nearly 70% of those children with an IEP were identified with treatable vision problems and yet would pass the vision screening because their vision problem did not affect their distant eyesight”
- **Cost burden for county health departments = \$5,019,079**
 - Currently school nurses can’t verify which students have had an eye exam within the last year, and in many cases refer all students even
 - **\$250,000** = Baltimore City Health Dept. three screeners and office staff for three grades ([Politico](#))
 - **\$300,000 (\$17 per student)** = [Vision for Baltimore](#) screen all students up to 8th grade (#17,614)
 - **\$17 x 289,666 = \$5,019,079 cost burden annually**
- **Cost burden for school nurses follow up calls = \$1,943,667**
 - School nurses call 2x parents/guardians to check for follow up with eye exam

- HCPSS budget on the cost for nurses to make phone calls
 - \$69,972 per nurse who works 7 hrs per day for 180 school days = \$55.53 per hour
 - 2 phone calls take 30 minutes total to call parent = \$27.78.
 - Annually over 35,000 students fail a screening = 70,000 phone calls.
 - Annual cost = \$1,943,667 per year just in administrative cost

Screening Cost	Eye exam & glasses	# of students get actual vision care
\$250,000 Baltimore City Health Dept.	\$117-150	#2,136 - 1,666
\$1,943,667 nurses	\$117-150	#16,612 - 12,958
\$5,019,079 state-wide	\$117-150	#43,898 - 33,461

Create a more Targeted, Efficient School Vision Screening System

• Parent pre-screening at registration

- Reduce number of new students screened
- Atticus Act information given so parents can pre-screen their child for at-risk groups & signs and symptoms
- Eye exam form parents can use, similar to the [dental exam forms](#) already sent home
- List of participating providers with the Pediatric Vision Program who can input follow up information in the provider portal

• Pediatric Vision Program

- Allow parents to follow up electronically
- Already have state protocol and database systems ([MVA Online Vision Certification Service](#) and [Immunet](#)) in place easing a level of effort toward expansion to include pediatric vision care data.
- Reduce immediate and future county health department and nurse administrative cost
- Reduce number of students needing vision screenings by cross reference students eye exam records (12 months) to determine if student needs an in school vision screening ([Atticus Act 2018](#)).
- Reduce duplicative screening and increase actual care with follow-up eye exams

• Pre-screening by identifying at-risk groups for vision disorders

- **Prevent Blindness strongly believes that some children should be directly referred to an eye care specialist for a comprehensive eye examination rather than undergo a vision screening.**
 - Children with known neurodevelopmental disorders in any area (e.g., hearing impairment, motor abnormalities such as cerebral palsy, cognitive impairment, autism spectrum disorders, speech delay). These children have a higher rate of vision problems than those without neurodevelopmental abnormalities.
- [Massachusetts legislation](#)
 - For children who fail to pass the vision screening and **for children diagnosed with neurodevelopmental delay**, proof of a comprehensive eye examination performed by a licensed optometrist or ophthalmologist chosen by the child's parent or guardian indicating any pertinent diagnosis, treatment, prognosis, recommendation and evidence of follow-up treatment, if necessary, shall be provided.
- **Ohio special ed vision legislation**
 - Within three months after a student identified with disabilities begins receiving services for the first time under an individualized education program, the school district in which that student is enrolled shall require the student to undergo a comprehensive eye examination.

Maryland's children are not receiving the quality vision care they need due to lack of managed care. By using current federal funding to create managed care infrastructure while funding is still available, Maryland can fix a vision screening system that is allowing too many students to fall through the cracks. Last year, I asked the Maryland Health Department to implement administratively the Pediatric Vision Program to mitigate the significant screening cost for the local counties to make up the grades from COVID school shutdown as well as create health infrastructure. The Department did not so now I am asking you as lawmakers to fix a system so there will be no more Atticus's or students sitting in classrooms struggling to learn because they can't see.