

2023 MASHN HB 1054 House Ways and Means Hearing 3.

Uploaded by: Elizabeth Elliott

Position: FAV



Committee: House Ways and Means Committee
Bill Number: House Bill 1054: School Health and Vision Services – Screenings and Eye Examinations
Hearing Date: March 1, 2023
Position: Support

The Maryland Association of School Health Nurses (MASHN) supports *HB 1054, School Health and Vision Services – Screenings and Eye Examinations, as amended*. The bill provides for expansion of vision screening services to students in Maryland and establishes the State Vision for Maryland Program to support needed services identified in school-based vision screenings. Vision screening of students in Maryland was significantly negatively impacted during the COVID pandemic. Additional focus on vision screening and on provision of needed eye examinations and glasses is critical to ensuring students can first see to learn to read, and then in later elementary years and beyond, to be able to read to learn.

The bill's focus includes strategies to increase students screened for vision, resource identification for students referred and referral of specific students for a comprehensive eye examination. We support:

- Screening for additional students in Grade 3 or Grade 4. This screening is appropriate and indicated by professional associations and eye care professionals. MASHN raises the concern that this will be an additional mandate on already overburdened school health services staff in the face of a critical nursing shortage especially impacting School Nurses.
- Referral of students diagnosed with diagnosed neurodevelopmental delay to be referred for a comprehensive eye exam.
- Involvement of the Student Support Team in identifying additional resources for comprehensive eye examination and glasses for students who are referred, and for whom

School Health Services does not receive documentation on the established eye exam form from families that needed services were obtained within 60 days.

The bill outlines a requirement that the Eye Exam form shall be returned prior to enrollment.

- We strongly support additional options for enrollment so as not create barriers for enrollment. It is critical that principals waive the prohibition of enrollment for students for whom the eye exam form is not returned.
- Additional options as outlined include a plan for reporting the information required in the eye exam form to the County Board as developed by the school and the parent/guardian of the student.
- As vision screening is now required in the year that a student enters a school system, and results of the screenings and the number of students receiving the recommended services are reported to the Maryland Department of Health, we encourage this data to be considered as evidence of the plan for reporting the information required in the eye exam form to the County Board.

Across Maryland, School Nurses often experience that students do not receive indicated eye examinations and glasses after a need is identified through the vision screening process. A challenge is identification of resources. MASHN supports the establishment of the Vision for Maryland Program. The program would aid in meeting a health need that is often unmet for public school students in Maryland.

Conclusion and Recommendation

We appreciate the opportunity to provide input and appreciate the support of Delegate Hill to enhance opportunities to support both vision screening for students and to connect students identified as in need of vision resources to eye examinations and glasses.

MASHN asks for a favorable report on HB 1054, as amended. Please direct inquiries to Elizabeth Elliott, President-Elect of the Maryland Association of School Health Nurses at mdschoolnurses@gmail.com.

HB 1054_mgoldstein_fav 2023.pdf

Uploaded by: Mathew Goldstein

Position: FAV



Secular Maryland

secularmaryland@tutanota.com

March 01, 2023

HB 1054 - SUPPORT WITH AMENDMENT I

School Health and Vision Services - Screenings and Eye Examinations

Dear Chair Atterbeary, Vice-Chair Wilkins, and Members of the Ways and Means Committee,

Secular Maryland supports the changes to the law proposed by this bill that will help to ensure all children with vision problems that interfere with their ability to fully participate in school classes will be diagnosed and treated. We request that this bill be amended to remove the counter-productive religious belief exemption from Education §7-401

Maryland provides hearing and vision screening for all students in the first year of public school entry, first grade, and eighth or ninth grade. However, Education §7-401(g) declares that parents can deny their children a vision and hearing screening by claiming there is a conflict with their religious beliefs. The main goal of vision screening is to identify children who have or are at risk of developing strabismus (crossed eye) and/or amblyopia (lazy eye), which can lead to permanent visual impairment unless treated in early childhood. Between 2 and 5% of the population in western countries have strabismus and/or amblyopia. Additional problems that can be detected by vision screening include strabismus (eye misalignment), cataracts, glaucoma, ptosis (drooping eyelid), refractive errors such as myopia ("nearsightedness"), hyperopia ("farsightedness") and astigmatism, and other more serious conditions such as tumors or neurological diseases. Other states, including our immediate neighbors Pennsylvania and West Virginia, do not have such a religious exemption.

Respectfully,
Mathew Goldstein
3838 Early Glow Ln
Bowie, MD

HB 1054- LWVMD- FAV- School Vision Services.pdf

Uploaded by: Nora Miller Smith

Position: FAV



TESTIMONY TO THE HOUSE WAYS AND MEANS COMMITTEE

HB1054: School Health and Vision Services- Screenings and Eye Examinations

POSITION: Support

BY: Nancy Soreng, President

DATE: March 1, 2023

The League of Women Voters supports **House Bill 1054: School Health and Vision Services- Screenings and Eye Examinations**. The League believes that early intervention measures are essential to help children reach their full potential. It supports policies and programs at all levels of the community and government that promote the well-being and encourage the full development of all children.

Per the Journal of School Health¹:

-More than 20% of school-aged youth have some kind of vision problem.... When diagnosed with eye care problems, Black youth living in poverty received fewer and less intensive services. Causal pathways through which vision problems adversely affect academic achievement include sensory perceptions, cognition, and school connectedness. Vision screening is widespread in the nation's schools, but **the educational (and public health) benefits from these efforts are jeopardized by lack of follow-up and coordination of efforts.**

Students with neurodevelopmental disorders such as Down Syndrome, a family history of eye diseases, or those with medical issues such as diabetes or a history of premature birth are particularly at risk for vision problems.

Maryland law mandates periodic vision screening tests for all students in public schools upon entry to school, in first grade, and in eighth or ninth grade. If a child fails a screening test, the parents are notified and advised to arrange for a comprehensive eye exam with a pediatric optometrist or ophthalmologist who participates in the Pediatric Vision program. Only a comprehensive eye exam with a licensed provider can diagnose a child's visual problem and determine whether glasses or another corrective device is needed.

House Bill 1054 will mandate an additional vision screening, for students in third or fourth grade. The Vision for Maryland Program will help ensure that all children who need vision support services receive them. A central repository of information on students' vision needs will help coordinate communication and interventions on behalf of the student between the school, parents, and pediatric optometrists and ophthalmologists.

¹ <https://pubmed.ncbi.nlm.nih.gov/21923871/>

The current school vision screening system does not benefit all of the Maryland school children who need vision services. **Too many students fail to receive the help they need in order to succeed in school- even if it's a need as fundamental, and as simple, as a pair of glasses.** Although the Affordable Care Act considers pediatric vision care an essential health benefit, and thus comprehensive pediatric eye exams are covered, full coverage for glasses is not always included as a benefit.

This is a matter of equity. It is important that all children in our state receive the vision services they need to succeed, and for that reason, the League and its 1,500+ members urge the committee to give a favorable report to House Bill 1054.

2023 Vision HB1054 Sponsor Testimony final.pdf

Uploaded by: Terri Hill

Position: FAV

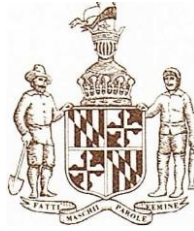
TERRI L. HILL, M.D.

Legislative District 12A
Howard County

Health and Government
Operations Committee

Subcommittees
Government Operations and
Health Facilities

Public Health and Minority
Health Disparities



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THE MARYLAND HOUSE OF DELEGATES

ANNAPOLIS, MARYLAND 21401

SUPPORT

HB1054 – School and Health Vision Services – Screenings and Eye Examinations

March 1, 2023

Chairwoman Atterbeary, Vice-chair Wilkins and Committee Members,

THE BUCK STOPS HERE, or at least it should. That is why **HB1054** is introduced.

THE PROBLEM – Many Maryland primary and secondary school children with vision problems never receive the glasses necessary for them to see well enough to read well enough to learn. **HB1054** underscores and builds on the commitment we made to our children and all Marylanders when we implemented the Blueprint for Maryland's Future.

HB1054, the work product of a multi-stakeholder groups including ophthalmologists, optometrists, representatives of the local school boards, State superintendents, state local public health officers, state and local libraries, vision advocates, and community service organizations, would:

- Establish the Vision for Maryland (V4MD) program, a collaborative between the Maryland Department of Education and the Maryland Department of Health. V4MD's role is to identify resources and partners throughout the state to successfully fill the gaps in pediatric vision care by providing vision exams and prescribed glasses to students with vision support needs who have fallen through the cracks, and to connect them with local providers and resources for ongoing and long-term follow-up and care management.
- Establish the Pediatric Vision Program, modeled on voluntary reporting of eye exam results to the Maryland Motor Vehicle Association, to facilitate reporting of eye exam findings and identify students and families in need of direction and support to get the needed vision aids.
- Add one of two recommended additional vision screenings for public school students.
- Standardize, based on jurisdictional best practices, the information shared with families regarding vision screenings, vision exams, and resources available for obtaining medically indicated exams and glasses.
- Modify the school registration and intake health forms to better identify whether students with identified health needs are having those needs addressed.
- Require a needs study be conducted upon which recommendations would be made on how best to implement and expand the Vision for Maryland program to every jurisdiction and ensure that every student needing eye exams or glasses is able to receive them, whether through insurance, philanthropy, or state resources.
- A with local resources, and with the Vision for Baltimore subsidiary of Vision to Learn to expand the current programs that are so that every jurisdiction will have what they need to ensure that no child needing glass is without a way of receiving them.

The sponsor amendments, clarify that the neither the local school system nor state is acting without the collaboration and approval of the parents or guardian, that the criteria upon which decisions about the need for

exams or glasses are set by appropriate medical authorities, that the appropriate stakeholders are involved with both the needs study and the implementation of the Vision for Maryland program, move the date by which the stakeholder group is convened to December 2023, and correct the Senate and House Committees to which reports are to be given.

HB1054 mandates an appropriation to cover the cost to local jurisdictions of additional eye screenings and a separate minimal annual appropriation for the implementation of the Vision for Maryland program, which would be modified after completion of the needs study. This will be money well invested, inarguably much lower cost than the costs associated with education failure, and qualifies for funding under the Blueprint. Across socioeconomic levels, 30% to 70% of students who fail vision screenings fail to either get the vision exams to diagnose the problem or the glasses needed to correct it. The reasons vary, but the result is the same: Johnny (or Jannie) can't learn if they can't read! By making sure that students needing glasses get them, we make a small upstream investment in huge downstream benefits for the students, the community, and our state.

I respectfully urge a favorable report on **HB1054** as amended.

A handwritten signature in black ink, appearing to be "D. L. P.", written in a cursive style.

Amendment HB1054-223624-01 Optometrists Opthamolog

Uploaded by: Terri Hill

Position: FAV



HB1054/223624/1

AMENDMENTS
PREPARED
BY THE
DEPT. OF LEGISLATIVE
SERVICES

23 FEB 23
15:35:32

BY: Delegate Hill
(To be offered in the Ways and Means Committee)

AMENDMENT TO HOUSE BILL 1054
(First Reading File Bill)

On page 5, in line 8, strike “Additional” and substitute “FOR THE PURPOSES OF ENCOURAGING LONG-TERM FOLLOW-UP AND VISION CARE MANAGEMENT, ADDITIONAL”.

On page 6, in line 15, strike “A” and substitute “FOR THE PURPOSES OF ENCOURAGING LONG-TERM FOLLOW-UP AND VISION CARE MANAGEMENT, A”.

Amendment HB1054-883028-01 Vision.pdf

Uploaded by: Terri Hill

Position: FAV



HB1054/883028/1

AMENDMENTS
PREPARED
BY THE
DEPT. OF LEGISLATIVE
SERVICES

21 FEB 23
11:32:43

BY: Delegate Hill
(To be offered in the Ways and Means Committee)

AMENDMENTS TO HOUSE BILL 1054
(First Reading File Bill)

AMENDMENT NO. 1

On page 1, in line 9, after “programs” insert “and certain parents or guardians”.

AMENDMENT NO. 2

On page 3, in line 2, strike “CREATES” and substitute “UTILIZES”; and in line 7, after “STUDENT’S” insert “IDENTIFIED”.

On page 4, in line 17, strike “COUNTY” and substitute “LOCAL”; in the same line, after “BOARD” insert “, BASED ON THE STANDARDS AND PROTOCOLS DEVELOPED BY PEDIATRIC OPHTHALMOLOGIC AND OPTOMETRIC VISION EXPERTS OR AS PUBLISHED BY OPHTHALMOLOGIC AND OPTOMETRIC PROFESSIONAL ASSOCIATIONS,”; in lines 22 and 24, in each instance, strike “COUNTY” and substitute “LOCAL”; in line 24, after the second “THE” insert “STUDENT, PARENTS OR GUARDIANS OF THE STUDENT, AND THE”; and strike beginning with “TO” in line 26 down through “STUDENT” in line 27 and substitute “TO CONNECT THE STUDENT WITH RESOURCES TO OBTAIN AN EYE EXAMINATION AND, IF MEDICALLY INDICATED, EYEGLASSES”.

On page 5, in line 29, strike “30” and substitute “60”.

On page 6, in line 23, after “(2)” insert “(I)”; and after line 25, insert:

“(II) A PRINCIPAL MAY WAIVE THE PROHIBITION ON ENROLLMENT UNDER SUBPARAGRAPH (I) OF THIS PARAGRAPH UNTIL THE FORM IS COMPLETED IF A PLAN FOR TIMELY COMPLETION AND RETURN OF THE FORM

REQUIRED IN SUBPARAGRAPH (I) OF THIS PARAGRAPH, OR FOR REPORTING THE INFORMATION REQUIRED BY THE FORM TO THE COUNTY BOARD, HAS BEEN DEVELOPED BY THE SCHOOL AND THE PARENTS OR GUARDIANS OF THE STUDENT.”.

On page 7, in line 1, after “HEALTH” insert “, AND IN CONSULTATION WITH OPHTHALMOLOGIC AND OPTOMETRIC PEDIATRIC VISION EXPERTS”.

On page 8, strike beginning with the comma in line 3 down through “EYEGASSES” in line 4; in line 5, strike “, EXAMS, AND EYEGASSES”; in line 8, after “TO” insert “THE SENATE COMMITTEE ON EDUCATION, ENERGY, AND THE ENVIRONMENT, THE EDUCATION, BUSINESS AND ADMINISTRATION SUBCOMMITTEE OF THE SENATE BUDGET AND TAXATION COMMITTEE,”; in line 9, after the second “THE” insert “EDUCATION AND ECONOMIC DEVELOPMENT SUBCOMMITTEE OF THE”; in line 20, after “(C)” insert “(1)”; strike beginning with the second “TO” in line 20 down through “LEARN” in line 21; in line 21, after “SERVICES” insert “STATEWIDE”; in line 22, after “STUDENTS” insert “IN EACH COUNTY”; in the same line, after “RECEIVED” insert “MEDICALLY RECOMMENDED”; after line 23, insert:

“(2) THE PROGRAM SHALL BE CUSTOMIZED AND MODELED ON THE VISION FOR BALTIMORE PROGRAM.”;

in line 24, after “PROGRAM,” insert “IN COLLABORATION WITH THE STATE OPHTHALMOLOGIC, OPTOMETRIC, AND OPTICIAN PROFESSIONAL SOCIETIES, AND”; and in lines 27 and 29, in each instance, strike “TO LEARN” and substitute “FOR MARYLAND”.

On page 9, in line 1, after “(1)” insert “(I)”; strike beginning with “VISION” in line 2 down through “LEARN” in line 3 and substitute “VISION FOR MARYLAND”; after line 3, insert:

“(II) THE PROGRAM MAY RECEIVE FUNDING THROUGH APPROPRIATIONS DESIGNATED FOR THE BLUEPRINT FOR MARYLAND’S FUTURE.”;

in line 11, strike “FINANCE COMMITTEE” and substitute “COMMITTEE ON EDUCATION, ENERGY, AND THE ENVIRONMENT, THE EDUCATION, BUSINESS AND ADMINISTRATION SUBCOMMITTEE OF THE SENATE BUDGET AND TAXATION COMMITTEE”; in line 13, after “THE” insert “EDUCATION AND ECONOMIC DEVELOPMENT SUBCOMMITTEE OF THE”; in lines 15 and 16, strike “VISION TO LEARN” and substitute “VISION FOR MARYLAND”; in line 26, strike “Finance Committee and” and substitute “Committee on Education, Energy, and the Environment, the Education, Business and Administration Subcommittee of the Senate Budget and Taxation Committee,”; and in line 27, after “Committee” insert “, the House Ways and Means Committee, and the Education and Economic Development Subcommittee of the House Appropriations Committee”.

On page 10, in line 3, after “includes” insert “representatives of local school superintendents,”; in the same line, strike “county” and substitute “local”; in line 5, after “Baltimore” insert “, local public libraries”; strike beginning with “Education” in line 30 down through “Committee” in line 31 and substitute “Committee on Education, Energy, and the Environment, the Education, Business and Administration Subcommittee of the Senate Budget and Taxation Committee”; and in line 32, after the second “the” insert “Education and”.

Amendment HB1054-923026-01.pdf

Uploaded by: Terri Hill

Position: FAV



HB1054/923026/1

AMENDMENTS
PREPARED
BY THE
DEPT. OF LEGISLATIVE
SERVICES

23 FEB 23
09:32:13

BY: Delegate Hill
(To be offered in the Ways and Means Committee)

AMENDMENT TO HOUSE BILL 1054
(First Reading File Bill)

On page 10, in line 2, strike “2024” and substitute “2023”.

HB1054-WM_MACo_SWA.pdf

Uploaded by: Brianna January

Position: FWA



House Bill 1054

School Health and Vision Services – Screenings and Eye Examinations

MACo Position: **SUPPORT WITH
AMENDMENTS**

To: Ways and Means Committee

Date: March 1, 2023

From: Brianna January

The Maryland Association of Counties (MACo) **SUPPORTS HB 1054 WITH AMENDMENTS**. This bill would establish a statewide Vision for Maryland Program, implement pilot programs in local jurisdictions, increase the required number of vision screenings from 3 to 4, and would ultimately place the onus on school systems to ensure all public school students who fail screenings receive full vision exams and glasses if prescribed.

Counties and local education agencies understand the critical importance of healthy vision in the success of our students. Counties have been engaged on various iterations of this bill for a long time and welcome further collaboration on it.

HB 1054 would benefit from amendments to address some county concerns, including uncertainty on the match between state resources and actual costs to implement the abundant goals of the bill.

Amendments that could address some of these concerns include the following:

- **Shifting the Vision for Maryland Program and accompanying \$2.5 million in state funding to a statewide pilot program with a required study** to see if the programming and its funding are sufficient to address statewide need, with special emphasis on estimating the impact on the local school systems and potential costs of providing eye exams and glasses. Additionally, the study amendments should include **evaluating options for how the State can leverage its economy of scale to buy glasses and other vision accessories at potentially reduced cost**.
- **Clarifying that the Vision for Maryland Program and accompanying \$2.5 million in state funding is supporting operational and fiscal needs of the existing (and under HB 1054, expanded) vision screening requirements for all public school students in the state.**

Counties welcome the opportunity to work with the Committee on these suggested amendments to better align the bill's goals with the realities and needs of the local jurisdictions and school systems who would be bound to carry out the bill's charges. For those reasons, MACo **SUPPORTS HB 1054 WITH AMENDMENTS**.

HB1054_Screenings and Eye Examinations_Catherine C

Uploaded by: Catherine Carter

Position: FWA



HB1054: 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 needlessly struggle because they lack access to vision care. I am favorable with amendments for HB1054, as does the Free State PTA.

Amendment: Create the Taskforce and Feasibility Report before the establishment of the Vision for Maryland Program to ensure we are addressing barriers to continuance of care. Require local, state, medical, educational, and advocacy stakeholders to develop a sustainable model and improve access to community vision care to service all 24 school districts, similar to the Task Force on Oral Health that was formed as a result of legislation passed during the 2021 regular Session ([SB 100/HB 368 - Chapter 600](#)).

A majority of the bill fully addresses many of the gaps in our current vision screenings systems that have been failing students like my son Atticus, a computerized screening reporting system and referring students with neurological delays to an eye exam just as they refer student with speech delays to a hearing exam. I have concerns about the sustainability of a School Based Vision Program if the barriers to annual continuance of care that a child with a vision disability requires are not addressed. Improving community access to vision care will reduce the burden to school screening and vision programs, making them more effective and sustainable.

As project manager for the Howard County eye exam clinic, giving 168+ eye exams and 117+ pairs of glasses was wonderful, but I worry about the barriers these parents, nurses, nonprofits, and doctors told me be about with getting the annually continuance of care a child with a vision disability requires:

- Parents struggled to find an eye doctor who accepted Medicaid.
- Working parents struggled to find one that had hours they could take their children.
- Other parents lacked transportation, insurance, and money for the copay for the glasses.
- A grandmother of special needs child said the cheap Medicaid glasses were constantly breaking, they only got two per year, and she couldn't afford the more durable glasses or replacements.
- The school nurses didn't have a list of eye doctors who accepted their eye exam vouchers.
- Nurses said none of the health clinics had eye exams resources.
- Lions Club said they have a limited number of funds for their vouchers.
- Eye doctors said they can't afford to see Medicaid patient because 3rd party administrators take a most of the \$140 reimbursement, leaving doctors only \$30-40 per eye exam vs \$110 for private insurance
- Medicaid eye doctor practices are leaving Maryland

Barriers to continuance of care impacts School Based Vision Programs like Vision for Baltimore

[Vision for Baltimore Study 2021](#) - Dr. Collins

*Our study showed benefit at 1 year that was not sustained after 2 years. The reasons for this may be that students may wear eyeglasses less over time or that the refractive correction may no longer be sufficient. A similar decrease in impact over time has been reported previously,¹⁶ as has decreased use of eyeglasses with time.³² **Collectively, these findings underscore that for SBVPs to maximize impact, they must not only provide eyeglasses but also ensure mechanisms for monitoring wear, replacement, and connection to community eye care clinicians for long-term care.**³³*

Referral to community care from school-based eye care programs in the United States 2019 - Dr. Collins

Approximately 25% of school-aged children in the United States have vision abnormalities, most commonly refractive error that can be corrected with spectacles. Limited follow-up adherence after failed school-based vision screening led to an increase in school-based eye care programs that provide screening, eye examinations, and spectacle prescription at the school. These programs address the access barrier and often provide the first point of contact between children and eye care. Nevertheless, several lower prevalence conditions, such as amblyopia, strabismus, and glaucoma, cannot be adequately treated in the school setting, and some require frequent and long-term follow-up, necessitating referral to eye care providers in the community. We conducted a literature review and identified 10 programs that provided school-based screening, examinations, and spectacle prescription and reviewed their referral rates, criteria, mechanisms, adherence, ocular findings at referral, and long-term care plans. Most programs referred 1% to 5% of screened children. Most communicated with parents or guardians through referral letters and used various strategies to incentivize adherence. **Referral adherence was 20-50% in the four programs that reported these data. School-based eye care programs rarely referred children for long-term follow-up care needs, such as updating spectacle prescriptions annually.**

As parent, this bill modernizes a very inefficient, costly school vision screening where on average only 34% of students who fail a vision screening report getting an eye exam.

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%

Establishes Computerized Pediatric Vision Program

- Computerize the vision screening process and follow up reporting which will reduce duplicative screening and increase actual care with follow-up eye exams
- Repository system will reduce immediate and future county health department and nurse administrative cost because nurses look up follow vs the more administratively costly process of tracking paper forms and calling parents
- Screenings cost counties \$5 million annually and follow up costs schools \$1.9 million annually
- Already have state protocol and database systems ([MVA Online Vision Certification Service](#) and [ImmuneNet](#)) in place easing a level of effort toward expansion to include pediatric vision care data.
- Parents can follow up electronically vs paper forms
- Provides parents and schools a list of local eye doctor providers participates
- Only screen students who have not had an eye exam in the past 12 months ([Atticus Act 2018](#))

Refers students with neurodevelopment disorders to an eye exam

- Atticus had an IEP for ADHA and autism, neurodevelopmental disorders. As an at-risk group, he should have been referred to an eye exam to rule out vision impairment as Massachusetts and Ohio requires. Misdiagnosed, Atticus spent years getting the wrong accommodations and services. He passed all his school screenings.
- **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.**

- [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”
- [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.

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
- 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

Maryland's children are not receiving the quality vision care they need due to lack of managed care. Maryland can fix a vision screening system that is allowing too many students to fall through the cracks. 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.

HB1054_FWA_MSEPS_School Health & Vision Services -

Uploaded by: Danna Kauffman

Position: FWA



TO: The Honorable Vanessa E. Atterbeary, Chair
Members, House Ways and Means Committee
The Honorable Terri L. Hill
The Honorable Deni Taveras

FROM: Danna L. Kauffman
Pamela Metz Kasemeyer
J. Steven Wise
410-244-7000

DATE: March 1, 2023

RE: **SUPPORT WITH AMENDMENT** – House Bill 1054 – *School Health and Vision Services – Screenings and Eye Examinations*

The Maryland Society of Eye Physicians and Surgeons (MSEPS) is the professional organization of medical doctors who practice ophthalmology in the State of Maryland. Maryland is a world-renowned center for the training of ophthalmologists including the Wilmer Eye Institute at Johns Hopkins University. MSEPS **support with amendment** House Bill 1054 with the amendments offered by the sponsors. However, in our support, we do believe that there are policy issues that should be carefully considered as the General Assembly balances needs against the availability of resources.

MSEPS supports the expansion of vision screening to an additional grade above and beyond the current state mandate of first entry to school, first grade and eighth or ninth grade. Conducting vision screenings in an interim year of 3rd or 4th grade is important to close the seven-year gap between vision screenings in the present law (page 3). MSEPS also supports the utilization of a student health form that includes a place to describe any health issue, including vision issues, that may adversely affect academic performance (page 3) as a method for identifying issues early and assisting in taking appropriate steps.

One area that we believe needs to be amended is on page 6 of the bill in subsection (g). This subsection refers to “eye exams.” It is unclear if this “eye exam” is for those who fail the screening and/or have a neurodevelopmental delay or if it is intended to be across all students. MSEPS does not support comprehensive eye exams for all children before school entry. Rather, efforts should be focused on those children who have failed the vision screening and on increasing the frequency of vision screenings throughout childhood. The bill needs to clarify the reference to “eye exam” in this subsection. If the intent is to require comprehensive eye exams for all students, then MSEPS would not support and would request removal of this provision.

However, we do want to point out the inconsistency contained on page 5 of the bill and page 7 of

the bill regarding the Pediatric Vision Program. First, it is unclear why this needs to be designated as a “program,” given that it is only creating a central repository to allow optometrists and ophthalmologists to report results of eye exams after a failed screening. On that note, on page 5, it references optometrists and ophthalmologists who “participate” in the Pediatric Vision Program. However, the bill does not have a trigger for “participating” and, given that it is only the creation of a central repository for reporting, there really is no program for participation. We believe it creates confusion in the bill.

Regarding the Vision for Maryland program, MSEPS strongly supports addressing unmet needs for pediatric eye care in Maryland. However, the creation of a Vision for Maryland program would likely apply vast resources to areas of the State where these needs may not exist as critically as in other areas. Instead, the State should support work to properly assess the areas of the State with the greatest needs and shortfalls in services rather than applying the program Statewide. We recognize that the bill does allow for a phase-in of five counties at a time; however, it is still predicated on the program being Statewide. Without this initial assessment, it is difficult to determine if \$2.5 million (budget appropriation) would be adequate or whether it would become an unfunded mandate.

Therefore, MSEPS supports Senate Bill 57; however, we urge the Committee to consider the issues raised above. Thank you.

HB1054 Howard Co BOE Testimony 030123 for W&M - Vi

Uploaded by: Staff Howard County

Position: FWA



Board of Education of Howard County
Testimony Submitted to the Maryland House of Delegates,
Ways and Means Committee
March 1, 2023

Board of Education
of Howard County

HB1054: FAVORABLE W/AMENDMENTS
School Health and Vision Services - Screenings and Eye Examinations

Antonia Watts, *Chair*

Yun Lu, Ph.D., *Vice Chair*

Linfeng Chen, Ph.D.

Jennifer Swickard Mallo

Jacky McCoy

Jolene Mosley

Abisola Ayoola
Student Member

Michael J. Martirano, Ed.D.
Superintendent
Secretary/Treasurer

The Board of Education of Howard County (the Board) supports **HB1054 School Health and Vision Services - Screenings and Eye Examinations** with amendments to address required forms as well as availability of funding to make the changes envisioned by the bill related to providing vision screenings, exams, and glasses that would be the responsibility of the school system or local health department.

Initially, HB1054 requires a county board that has a student health form to be completed by a provider, to ask for identified health issues that may interfere with the student's academic performance and a plan to address the health issue. The Howard County Public School System's (HCPSS) Health Services staff notes while physicians will most likely report generalities that could be available for appropriate staff, academic learning plans would be a decision by the school team.

Expanding existing requirements for vision screenings at regular intervals, HB1054 also requires a student who enters the third or fourth grade to receive a screening for vision difficulties. Differing from previous versions of the bill, however, the language no longer includes requirements for students with an Individualized Education Program (IEP) or 504 Behavioral Plan, that exhibits problem behavior, has a change in medical history, or has a decline in academic performance. A public school would be required to refer a student who is known to have been diagnosed with a neurodevelopmental delay for an eye exam. If a student fails a vision screening, or shows signs and symptoms during the screening that justify an eye examination, the school system must ensure the student gets an exam and glasses if needed.

Under current law HCPSS partners with the Howard County Health Department (HCHD) to provide vision screenings for all students at entry into the school system, as well as in 1st and 8th grades. Results of these screenings are provided to parents/guardians, along with educational materials that overview potential visual impairments and an explanation of the educational impact of untreated visual impairments. Students who fail these screenings are also provided additional materials and a recommendation for parents/guardians to follow-up with a comprehensive eye exam. It is likely HCHD will need additional resources to provide screening for the added grade band, or the costs will fall to the school system. Staff is currently able to refer a student at any age for a screening when concerns with vision arise. The additional language for staff to determine if a student is showing signs and symptoms that justify an eye examination during a screening would fall to HCHD staff conducting the screening as opposed to the county board called for in the bill, but it is unclear what expertise would be needed to identify signs and symptoms and may require additional time to complete screenings. This same new section of the bill requires the county board to "determine whether the student subsequent to the screening should receive an eye

examination,” which is unclear as to what determination is being made beyond the outcome of a screening.

Two reporting requirements within the bill are troubling to HCPSS Health Services staff. The first is a requirement that if a student does not return an eye examination form within 30 days of receipt the school must notify the student support team. While HCPSS Health Services staff currently follows up on these forms and works with pupil personnel workers in encouraging families to seek exams and return paperwork, 30 days is too short of a turn-around. Most appointment lead times are longer than this, and thus the bill sets an unrealistic timeframe. More troubling, however, is the requirement for eye examination forms to be returned to the system before a student may be enrolled in school. Currently, the only health information required for enrollment is immunization verification for public health related concerns impacting the entire student population.

School systems can partner with the newly established Vision for Maryland Program or other nonprofits to fund required screenings and eye exams. HB1054 requires the Governor to include at least \$2.5 million annually for the Vision for Maryland Program, however this section of the bill does not become effective until 2025. The Program must enable Vision to Learn (VTL) - a nonprofit organization that provides vision screenings, eye examinations, and glasses, free of charge, to children in low-income communities and currently works with Baltimore City Schools - to expand its services to five counties in the state each fiscal year until VTL services are available in every county. Staff supports this initial appropriation that could help incrementally expand services for students. However, funding equivalent to school system needs should be fully realized before expansion of mandated screenings and exams as outlined in HB1054. The bill does include \$500,000 annually that could be distributed to county boards to cover screenings, exams, or eyeglasses required by both existing statute and this bill, but the new grade band screening alone would likely not be covered by this amount when disbursed across 24 counties.

Lastly, HB1054 convenes a workgroup with a report due by December 2024 that would include county boards of education, local health departments, the Maryland Optometric Association, the Maryland Society of Eye Physicians and Surgeons, Vision for Baltimore, and any other relevant state and local agencies or organizations to conduct a needs analysis and feasibility study on vision care for children in the state. This report would be beneficial if conducted prior to the mandates imposed by the bill.

The Board acknowledges and appreciates the sponsor has worked over the years on this bill to address concerns from advocates. Anticipated additional amendments recently shared by the sponsor to address what measures would be used to determine signs and symptoms that justify an eye examination during a screening, clarify the responsibility of local school systems to connect students with resources rather than provide them, and indicate the scope of the \$500,000 available to county boards is limited to required screenings, reflects their willingness to lessen the unfunded mandate on school systems and local health departments.

With the remaining concerns addressed through amendments, we urge a FAVORABLE report of HB1054 from this Committee.

HB 1054_ School Health and Vision Services – Scree

Uploaded by: Alexa Thomas

Position: UNF



PSSAM
Public School Superintendents' Association
OF MARYLAND

vMary Pat Fannon, Executive Director
1217 S. Potomac Street
Baltimore, MD 21224
410-935-7281
marypat.fannon@pssam.org

BILL: HB 1054
TITLE: School Health and Vision Services – Screenings and Eye Examinations
DATE: March 1, 2023
POSITION: Oppose
COMMITTEE: Ways and Means
CONTACT: Mary Pat Fannon, Executive Director, PSSAM

The Public School Superintendents' Association of Maryland (PSSAM), on behalf of all twenty-four public school superintendents, **opposes** House Bill 1054.

House Bill 1054 requires local boards of education or local health departments to provide vision screenings to specified students and to ensure students who fail a vision screening receive an eye examination and, if recommended, eyeglasses. The bill further requires that, before a student may enroll in public school, the student must return a completed eye examination form to the local board or LHD. Further, the bill establishes a Pediatric Vision Program, to facilitate communication between pediatric optometrists and ophthalmologists and school health professionals, and the Vision for Maryland Program, to expand the services provided by Vision to Learn (VTL) to every county in the State.

PSSAM's primary concern with House Bill 1054 is the significantly expanded scope of mandated school-based vision screenings, as well as prescriptive procedures and vision services. Any mandated expansion of the annual vision screenings impacts both local school systems and county health departments, both of which are required to provide vision screenings to students as specified in existing law.

PSSAM supports maintaining the current law, under §7-404 of the Education Article, which directs existing protocols for hearing and vision screenings. Under current law, vision screenings are mandated upon entering school, in grade one, and grades eight or nine. If, as proposed in this bill, the mandated annual vision screenings are expanded to include either third or fourth grade, the costs for doing so would be imposed on local school systems or local health departments, creating an unfunded mandate.

Maryland's superintendents champion a statewide approach to vision screening that ensures the timely assessment of each student's hearing and vision health condition. PSSAM appreciates the bill's proposal to mandate state funding for the new and expanded "Vision for Maryland" programs. However, there is no state funding identified for the costs of administering expanded vision screenings that will fall under the responsibility of school systems and local governments. In addition to the expanded number of mandated vision screenings, the bill further requires school systems to "ensure" that a student receives the recommended eyeglasses. As laudable as this goal is, it must be supported by state resources to ensure equity for each student and family.

For these reasons, PSSAM **opposes** House Bill 1054 and urges an unfavorable report.

HB 1054.State Vision Program and Expanded Screenin

Uploaded by: John Woolums

Position: UNF

BILL: House Bill 1054
TITLE: School Health and Vision Services - Screenings and Eye Examinations
DATE: March 1, 2023
POSITION: OPPOSE
COMMITTEE: Ways and Means
CONTACT: John R. Woolums, Esq.

The Maryland Association of Boards of Education (MABE) opposes House Bill 1054 which would establish the Vision for Maryland Program, significantly expand the scope of mandated school-based vision screenings, and dictate very prescriptive procedures and vision services in response to student behaviors. MABE notes that any mandated expansion of the annual vision screening impacts both local school systems and county health departments, both of which are required to provide vision screenings to students as specified in the law. MABE also notes that a prior version of this bill would have placed the Vision for Maryland Program within the Maryland Department of Health (MDH) rather than the Maryland State Department of Education (MSDE).

Under this bill, MSDE would be required to administer the Vision for Maryland Program Pediatric Vision Program to provide eye examinations to students who fail the required vision screening and eyeglasses if determined necessary by the examination. MABE supports maintaining the current law, under §7-404 of the Education Article, which requires student hearing and vision screenings. For many years the requirements were for grades four, five, or six and grade nine. More recently these requirements were updated to require vision screenings upon entering school, in grade one, and grade eight or nine. If, as proposed in this bill, the mandated annual vision screenings are expanded to include either third or fourth grade, the costs for doing so would be imposed on local school systems or local health departments, depending on the locally developed program.

MABE supports a statewide approach to setting standards for student health screenings that ensures the timely assessment of each student's hearing and vision health condition. Therefore, MABE appreciates the proposal to mandate state funding to support the administration of new state programs proposed under this bill. However, given that the costs of administering and delivering the required vision screenings would be the responsibility of school systems and local governments, MABE must also highlight the equity issues arising from expanding the scope of the mandated services without sufficient state funding. This bill would not only significantly expand the number of mandated vision screenings, but would also require school systems to "ensure" that a student receives the recommended eyeglasses. As laudable as these goals are, they must be supported by state resources to ensure equity for each student and family.

For these reasons, MABE requests an unfavorable report on House Bill 1054.

11b - HB 1054 - W_M - MACHO - LOC.docx.pdf

Uploaded by: Maryland State of

Position: UNF



**2023 SESSION
POSITION PAPER**

BILL: HB 1054 - School Health and Vision Services – Screenings and Eye Examinations
COMMITTEE: House Ways and Means Committee
POSITION: Letter of Concern
BILL ANALYSIS: HB 1954 would alter the duties of the State Department of Education’s and the Maryland Department of Health’s primary contact employees for school-based health centers to include implementation and oversight of the Vision for Maryland Program; alter the requirements for vision screenings for students; require a county board of education to determine whether certain students should receive an eye examination and eyeglasses; and establish the Pediatric Vision Program and the Vision for Maryland Program to expand vision support services; among other aspects.

POSITION RATIONALE: The Maryland Association of County Health Officer’s (MACHO) concern with HB 1054 is primarily related to unfunded mandates. Health Officers agree with the effort to improve vision services to students, but without an accompanying financial commitment, the additional requirements in HB 1054 would force local health departments (LHDs) to strip funding from other critical programs such as maternal-child and disease surveillance services.

The two areas of greatest concern for LHDs are:

- The requirement to expand vision screening services to all third of fourth graders. This *increases the provision of services by LHDs by 50% without any funding mechanism*. Funding will be needed to pay for a significant increase in staffing and for additional medical equipment. In addition to the lack of financial backing, staffing would need to be dramatically and simultaneously increased across the state in a sector with an insufficient workforce.
- The requirement for LHDs to track completion of diagnostic eye exams performed by private optometrists and ophthalmologists (page 5, lines 28-31). *There are no practical means available to LHDs to satisfy this condition*.

MACHO acknowledges that expanded student vision services is a laudable goal. However, without reliable, sustainable funding, LHDs cannot realistically carry out the bill’s mandates. Health Officers suggest that the Blueprint For Maryland’s Future contain a comprehensive student health plan. This plan should **prioritize and fund** initiatives such as improved vision and hearing services, behavioral health services, student nutrition and exercise, asthma control, etc. By taking a more holistic and coordinated approach, student health needs can be more effectively matched with the funding necessary to produce meaningful gains. These improvements will result in students more capable of achieving inside and outside of the classroom.

For these reasons MACHO expresses concerns with HB 1054. For more information, please contact Ruth Maiorana, Executive Director, MACHO, at rmaiora1@jhu.edu or 410-937-1433.

11a - X - HB 1054 - W_M - MDH - LOC.docx.pdf

Uploaded by: State of Maryland (MD)

Position: UNF



DEPARTMENT OF HEALTH

Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary

March 1, 2023

The Honorable Vanessa E. Atterbeary
Chair, House Ways and Means Committee
Room 131, House Office Building
Annapolis, Maryland 21401

RE: HB 1054 – School Health and Vision Services – Screenings and Eye Examinations – Letter of Concern

Dear Chair Atterbeary and Committee Members:

The Maryland Department of Health (MDH) is submitting this letter of concern for House Bill (HB) 1054 - School Health and Vision Services - Screenings and Eye Examinations. HB 1054 requires the School-Based Health Center (SBHC) Program to implement and oversee the Vision for Maryland Program that will expand the “Vision to Learn” vision support services to all counties in the State. HB 1054 further requires MDH and the Maryland State Department of Education (MSDE) to develop a Pediatric Vision Program including a “central repository” to allow exchange of health information between optometrists and ophthalmologists, and school health staff. The bill mandates an eye examination for children prior to school enrollment and vision screening for students in 3rd or 4th grade, and authorizes county boards of education to determine whether certain students should receive an eye examination or glasses.

HB 1054 will create a new requirement for children to provide documentation of an eye examination prior to school enrollment. However, there is no evidence to support this requirement. As such, the bill will place an undue burden on families and the health care system and may prevent children from school enrollment. The American Academy of Pediatrics recommends that pediatric health care providers conduct visual acuity screening at ages 4 and 5 years as well as in cooperative 3 year olds.¹ Children will be referred for a comprehensive eye examination by their pediatric health care provider if they fail screening or there are other concerns.

Furthermore, HB 1054 will require county boards of education to decide whether students who fail a vision screening or have signs or symptoms of concern should receive (1) an eye examination, and (2) if recommended by an examining ophthalmologist or optometrist, receive eyeglasses. Currently, if a student fails a school vision screening or has signs or symptoms of concern, the SHS guidelines state that the student should be referred for a comprehensive eye examination by an ophthalmologist or optometrist. These comprehensive eye examinations, completed by licensed medical professionals, are important to ensure the child receives the

¹ Bright Futures and American Academy of Pediatrics. (2022). *Recommendations for Preventive Pediatric Health Care*. https://downloads.aap.org/AAP/PDF/periodicity_schedule.pdf?_ga=2.152119417.1783973960.1676044506-730577136.1663587180

appropriate eye care to meet their needs. County boards of education include a variety of members who may not be knowledgeable on eye health and care and should not be involved in this decision-making. In addition, county boards of education should not decide on if glasses are necessary, as this health care decision should be made by the student's parent/guardian.

If you would like to discuss this further, please do not hesitate to contact Megan Peters, Acting Director of Governmental Affairs at megan.peters@maryland.gov or (410) 260-3190.

Sincerely,

A handwritten signature in blue ink, appearing to read "Laura Herrera Scott".

Laura Herrera Scott M.D., M.P.H
Secretary

HB1054_LOI_MACHC_School Health & Vision Services -

Uploaded by: Pam Kasemeyer

Position: INFO



TO: The Honorable Vanessa E. Atterbeary, Chair
Members, House Ways and Means Committee
The Honorable Terri L. Hill

FROM: Pamela Metz Kasemeyer
Danna L. Kauffman
Christine K. Krone
410-244-7000

DATE: March 1, 2023

RE: **LETTER OF INFORMATION** – House Bill 1054 – *School Health and Vision Services*
– *Screenings and Eye Examinations*

The Mid-Atlantic Association of Community Health Centers (MACHC) is the federally designated Primary Care Association for Delaware and Maryland Community Health Centers. As the backbone of the primary care safety net, Federally Qualified Health Centers (FQHCs) are united by a shared mission to ensure access to high-quality health care to all individuals, regardless of ability to pay. FQHCs are non-profit organizations providing comprehensive primary care to the medically underserved and uninsured. MACHC supports its members in the delivery of accessible, affordable, cost effective, and quality primary health care to those most in need. To this end, MACHC submits this **letter of information** for House Bill 1054.

MACHC appreciates the intent of the legislation and provides this letter of information solely as a matter of clarification and to ensure that if the bill moves forward, it is appropriately amended to ensure the program is under the purview of the school health program. Several MACHC members operate school based-based health centers. As such, school-based health centers are not located in every school and have a regulatory structure and service organization that differs dramatically from the school health program of each individual school. The bill, as drafted, places the vision screening program under the school-based health center program at MSDE instead of the school health program where it would apply to all schools.

2023 MASBHC HB 1054 House Side Letter of Informati

Uploaded by: Robyn Elliott

Position: INFO



Committee: House Ways and Means Committee

Bill Number: House Bill 1054 – School Health and Vision Services – Screenings and Eye Examinations

Hearing Date: March 1, 2023

Position: Letter of Information

The Maryland Assembly on School-Based Health Care is appreciative of being able to submit this letter of information regarding *House Bill 1054 – School Health and Vision Services – Screening and Eye Examinations*.

The bill places the vision screening program under the school-based health center program at MSDE (Education Article Education Article § 5-240). This is not the correct section of law. School-based health centers are not in every school. The vision screening program should be under the school health program, which is in every school.

If we can provide any additional information, please contact Robyn Elliott at relliott@policypartners.net.