

## Hampton Susan

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**Subject:** FW: Please consider my testimony in regards to HB 3000, SB 274 and HB 2755

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**From:** Lowery, John P. [<mailto:loweryj@pacificu.edu>]

**Sent:** Monday, March 04, 2013 11:46 AM

**To:** Rep Whisnant

**Subject:** Please consider my testimony in regards to HB 3000, SB 274 and HB 2755

Dear Representative Whisnant,

I would like to provide input on three inter-related bills (HB 3000, SB 274 and HB 2755) that are being considered at present. My perspective is unique, since I have spent the last 20 years providing eye care for children across the State of Oregon. I have been researching and evaluating children with vision related learning difficulties my entire career. As the optometrist for the Oregon Lions Statewide Low Vision Clinic, I have been providing educationally oriented vision exams for children with visual impairment around the state, as well as at the School for the Blind prior to its closing. I travel the state working with teachers of the visually impaired to develop strategies to enhance learning for children. I also see many children each week in community-based clinic settings. Each year, I see far too many children who have slipped through the cracks in vision screening. Unfortunately, most parents think that a vision screening is equal to a comprehensive vision exam. If you study the facts on vision care for young children, it is quite clear that screenings are inadequate as the only means of evaluating vision of preschoolers. Please consider the following evidence:

- Approximately 25% of children have vision disorders that can interfere with learning. This percentage is much higher for "at risk" children in special education or those who go on to commit crimes as teens. A study in New Jersey found the state could save around \$200 million in special education costs with intervention for those children with undiagnosed vision problems.
- At best, vision screenings (in all settings) are only able to identify 50-75% of children who have vision problems. In fact, the most common optical defect that impacts learning in children (farsightedness) is not detected by typical vision screenings using a distance eye chart.
- Many studies (including the Oregon Vision Screening Pilot Program that was commissioned by the Oregon Legislative Assembly in 2010) have shown that only about 50% of children who fail screenings actually receive the comprehensive vision exams and the treatment they need. In the Pilot Program, it was only possible to contact 52% of parents of children who had failed the screening despite many attempts by volunteers.
- Given the above facts on accuracy and follow-up on vision screenings, we know that at least 50% of children with visual problems would not receive glasses or other treatment necessary to fully participate in education. This is why the American Academy of Pediatric Ophthalmology recommends several screenings in the preschool years to improve outcomes. It seems obvious that one comprehensive eye exam would solve the problem.
- Each year, the Oregon Lions screen about 25,000 children at an approximate cost of \$350,000. Implementing a standard screening program across all schools in the state would cost about \$4 million annually.
- In Kentucky, where a law mandating full eye exams for children was passed in 2001, the state set aside \$150,000 to fund eye exams for children from low-income families. They found that the actual cost of eye exams was only about \$5000 since the vast majority of children had insurance coverage. In Oregon, annual comprehensive eye examinations are covered for children by private insurers or Oregon Health

Plan, and there are many non-profit agencies like the Lions and Oregon Vision Foundation available to help families in need.

- A 2009 report by the National Commission on Vision and Health, Building a Comprehensive Child Vision Care Model concluded that comprehensive vision exams are a much more cost effective public health intervention than screenings. The American Public Health Association and American Optometric Association have concluded that the most effective approach to children's vision care is comprehensive exams starting at 6-12 months of age with screenings as a secondary measure to monitor children once they are in school.

The statistics on vision screening are disheartening to me because I have been involved with developing and implementing screening programs throughout my career. I helped design the Lions Children's Vision Screening and have confidence that we are doing the best we can given the resources we have. However, I am continually reminded that we are falling short of our ultimate goals.

There are now two competing bills under consideration. HB 3000 that would require all children to have vision screening (with updated guidelines) and SB 274 that would require all children to have comprehensive vision exams prior to entering school. There is no doubt that comprehensive vision exams are not only more effective as a public health and educational measure but far more cost effective than vision screening. I think vision screenings (within the educational system) should only be performed on children who are unable to obtain a comprehensive eye exam. We know that even with the requirement as outlined in SB 274, that a small percentage of parents will not obtain eye exams for their children. School nurses could screen this much smaller subset of kids at a fraction of the cost of universal screenings for all children.

The related issue that you are considering is HB 2755 that specifies the administration and use of the Blind and Visually Impaired Fund. I am specifically concerned that this bill would allow BVIS funds to be used for vision screening in the state. I understand the financial challenges we have to support education in Oregon but using the BVIS funds for vision screening could quickly deplete the fund.

Over the past several years, I have seen the resources for children with visual impairment become increasingly challenged as special education and Regional Program budgets have been stressed. The greatest issue is that teachers have larger case loads and less time to spend with individual students. The one improvement I have seen is with funding available to provide technology and other resources for children with visual impairment. The Lions obtained a \$25,000 grant from the BVIS fund to run the Statewide Low Vision Clinic for the past two years. Our budget for low vision devices that I can provide directly to all students (regardless of income) has grown from \$2000/year to about \$10,000/year. Now I can provide students with truly effective technology with direct and immediate implementation after the evaluation. I don't have the details on all the expenditures from the BVIS fund over the past two years, but I strongly urge you not to rob the fund for vision screenings, especially considering the facts outlined above. The BVIS fund was put in place to make sure that children with visual impairment would have the resources they need throughout the state. These are our most at risk kids, most of whom have multiple disabilities. I did not oppose the closing of the School for the Blind because I felt that the establishment of the BVIS Fund was a reasonable means to offset the loss of more costly centralized resources (OSB) (and the use of funds for vision screening was removed from the final bill). Let's do the right thing here and make sure that there are adequate funds to support children with visual impairment throughout the state far into the future after we are all retired from public service. Let's also do the right thing and require all children to have a professional vision exam when entering school instead of relying on vision screenings that leave far too many with uncorrected vision problems.

Thank you for your time and consideration of these important matters.

Sincerely,

A handwritten signature in black ink, appearing to read "J. P. Lowery". The signature is fluid and cursive, with a long horizontal stroke at the end.

John P. Lowery, OD, MEd  
Professor and Chief of Pediatrics  
Pacific University College of Optometry  
Director, Oregon Lions Statewide Low Vision Clinic  
Oregon Lions Sight and Hearing Foundation

Disclaimer:

I have no financial interest in the proposed legislation regarding children's vision. I welcome the opportunity to evaluate more children and continue to provide high quality services through the non-profit agencies that I work for.