



**Children's Vision  
Massachusetts**  
Open Eyes. Open Doors.

September 2, 2016

Andy Slavitt, Acting Administrator  
Centers for Medicare & Medicaid Services  
7500 Security Boulevard  
Baltimore, MD 21244

**Children's Vision Massachusetts  
Coalition Co-Chairs**

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**RE: Section 1115 Demonstration Project Amendment and  
Extension Request to CMS by Commonwealth of Massachusetts**

Dear Mr. Slavitt,

On behalf the Children's Vision Massachusetts thank you for the opportunity to comment on the Section 1115 Demonstration Project Amendment and Extension Request submitted to the Centers on Medicare and Medicaid (CMS) by the Commonwealth of Massachusetts. As a vision advocacy coalition representing low income children, we offer the following comments in the interests of children who rely on MassHealth for their coverage and care.

Children's Vision Massachusetts is a seventy member coalition of families and professionals from the fields of ophthalmology, optometry, nursing, pediatrics, public health and education whose mission is to facilitate the development of a state-wide plan to improve the visual health of children. The Coalition's vision is that all children have the opportunity to develop their best possible vision to support healthy development and academic growth.

In the current proposal, MassHealth members are encouraged to enroll in a managed care organization (MCO) or accountable care organization (ACO) rather than the Primary Care Clinician (PCC) Plan; MassHealth proposes to provide selected fewer covered benefits to members who choose the PCC Plan, such as chiropractic services, **eye glasses** and hearing aids. We strongly oppose this proposal. Specifically, denying children access to Early Periodic Screening Diagnosis and Treatment (EPSDT) is contrary to federal law and the state does not advance a reasonable hypothesis for denying children this important benefit. We understand that to date, CMS has informed that state that children under 21 must be excluded from proposed provision. We are writing in support of CMS' decision and to emphasize that upholding access to EPSDT for low income children is critical to support many wellness outcomes including vision health. Supporting optimal vision development in childhood through access to quality vision screenings at all well visits, eye exams for referred children, and eyeglasses for children diagnosed with a vision disorder, will reduce health care costs over time and support academic achievement during childhood.

- ABCD Head Start
- Benjamin Franklin Institute of Technology
- Boston Children's Hospital
- Boston Medical Center
- Boston Public Health Commission
- Boston Public Schools
- Boston University School of Medicine
- Community Catalyst
- Federation for Children with Special Needs
- Harvard Vanguard Medical Associates
- MA Association for Parents of Visually Impaired
- MA Ch of the American Academy of Pediatrics
- MA Coalition of Nurse Practitioners
- MA Dept. of Developmental Services
- Massachusetts Dept. of Early Education and Care
- MA Dept. of Elementary and Secondary Education
- Massachusetts Department of Public Health
- Massachusetts General Hospital
- MA League of Community Health Centers
- MA Society of Eye Physicians and Surgeons
- MA Society of Optometrists
- Medford Optical
- New England College of Optometry
- Northeastern University School Health Institute
- Northshore Education Cooperative
- Nurture
- Partners for a Healthier Community
- Perkins School for the Blind
- Prevent Blindness
- Reach Out and Read
- Tufts Medical Center

Vision disorders are common in childhood. One in ten preschoolers is diagnosed with a vision problem and in the absence of treatment these children may develop amblyopia (lazy eye). If conditions leading to amblyopia are not diagnosed early, the result may be permanent vision loss. Amblyopia is known to cause more vision loss in people under 45 years old than all other causes of vision impairment combined. Additionally, the recently published [NIH-funded research study](#), *“Uncorrected Hyperopia and Pre-School Literacy: Results of vision in preschoolers- hyperopia in preschoolers,”* concluded that preschool age children with vision problems are at significantly increased risk of having worse performance on tests of early literacy. (Bruce Moore, Marjean T. Kulp, T. Rowan Candy, Elise Ciner, Lynn Cyert, Maureen Maguire, Jill Pentimonti, Maxwell Pistilli, Graham Quinn, Gui-Shuang Ying. Vision in Preschoolers - Hyperopia in Preschoolers (VIP - Hip) Study: Effect of Uncorrected Hyperopia on Early Literacy. Invest Ophthalmol Vis Sci 2015 56:5208). This landmark study has major implications for children, families, school systems, and taxpayers regarding the significance of the visual status of children as they begin their formal education process. It confirms that children without access to vision care services (screening, eye exams and eyeglasses), especially in the preschool and early elementary years, will be at a disadvantage in the classroom.

Most childhood vision problems respond to treatment, but this requires access to quality screening programs, access to eye exams, and the ability to provide and support the prescribed treatment which often includes eyeglasses. EPSDT screenings are the critical first step to assure children optimal vision development and the sight required to maximize learning.

Thank you for the opportunity to provide comments regarding the waiver.

Regards,



Katherine Majzoub, RN, MBA  
Director, Northeast Region  
Prevent Blindness