

A Decade of Progress

"I always like to come back to the basics, and I can't think of anything more basic than a child being able to see the blackboard." — Jerry Brown, Former Governor of California, Jefferson Elementary School in Sacramento, 2013

Maria, * a 10-year-old girl in East Los Angeles, brought a handheld magnifying glass with her to school every day which led many to think she aspired to be a scientist. Then teachers saw her using it to navigate her way around the playground. Imagine trying to play kickball while holding a magnifying glass. She's just one of many school children who have been provided with the glasses they need to succeed in school and in life by Vision To Learn.

Vision To Learn started on March 27, 2012, by providing five students at Napa Elementary School in Northridge, California with the glasses they needed but did not have. Since then, Vision To Learn has gone on to help more than two million kids in low-income communities spread across more than 750 cities in 15 states and the District of Columbia. We found a way to solve a problem that was hidden in plain sight (pun intended).

<u>Introduction</u>

Ask any classroom teacher and they can identify most of the kids who need glasses. They're the ones fidgeting, bothering their classmates or not paying attention in the back of the room because they can't see well enough to follow the lesson. And they're the ones who scoot their desk closer to the blackboard in hopes they can read what's written.

While serving as First Deputy Mayor of Los Angeles, I would meet regularly with people to better understand issues impacting their community. Over one such lunch with Don Attore, a long-time advisor to teacher organizations in California, I learned an eye-opener (pun intended, again). What we talked about has evolved into a simple, proven cost-effective, and now decade-long effort to help kids do better in school and in life.

We discussed some of the challenges facing children in public schools including their lack of access to healthcare. He thought about 10% of children went to school without the glasses they need.

The problem of kids lacking eyeglasses stayed with me. How could it be in the biggest city in the world's 5th largest economy that kids could be going to school every day without something so basic and so necessary?

Understanding the Problem

I asked a friend, Denita Willoughby, to find out more about the problem and understand how big in scope it really was. Denita had been the head of AT&T's Government Affairs in Los Angeles so was well versed in knowing how to look at a problem like this.

We learned that many kids were going to class without the glasses they needed, unable to see the board, read a textbook, do their homework, or take a test. If a child fell and broke their arm, they'd be taken to a clinic for an x-ray and fitted with a cast. But vision care is different. Without a proper vision screening a child or their family may not know there is an issue. And even if the problem has been identified, many families who are struggling to get by lack the financial resources, are unable to navigate the healthcare system or find a clinician anywhere near where they live to help their child get a proper eye exam and glasses.

The Williams Act in California requires that children in every school classroom be provided with the appropriate textbook. School districts must complete an annual audit certifying that each student has the appropriate learning materials. But if a child cannot read from the book, what is the point? Charitable organizations provide backpacks, shoes and school supplies – why not glasses?

The Scale of the Need

It turns out the lack of access to eye care impacts a lot more than just 10% of kids. According to the American Optometric Association (AOA), about one in four children will naturally need glasses to see the board, read a book, or participate in class (The Need). Unfortunately, in low-income communities across the country, millions of kids who need glasses do not have them. Children in these communities, urban and rural, lack glasses due to financial constraints, language barriers, unresponsive health bureaucracies, or the simple fact that there are no eye care professionals in their neighborhood.

Myopia, or nearsightedness, is increasing, particularly among children. As Samuel Pierce, O.D, AOA President, recently noted, "The future will be blurry at best for millions of children unless we start tackling this growing issue."

Of the children who needed glasses, less than 15% in Atlanta, 10% in Baltimore, and 18% in Detroit had them before Vision To Learn arrived on the scene. In Los Angeles barely one-third of children who needed glasses had them, but more than two-thirds of those children had glasses with the wrong prescription, so on the whole, only 11% of kids had the glasses they needed.

This issue presents itself in stark fashion in the juvenile detention system which is often where a young adult first receives a comprehensive physical exam. And, sadly, this has been known for some time. A Tennessee study in back in 1965 demonstrated the link between vision care and life outcomes, 74% of juveniles incarcerated at a state facility had vision-related learning issues. Another report in King County, Washington, showed more than 80% had vision problems. This is not just a Tennessee or Washington problem. Across the country, many children lack access to eye care and the glasses they need which can impact their path in life.

A compelling piece of Denita's research was information about a mobile eye care clinic operated by UCLA's Jules Stein Institute. Stein is a world-class organization which, as part of its mission, trains eye care professionals. During their training, budding doctors would travel on the clinic to visit shopping malls a couple of times a year, providing eye exams to a few dozen kids each time along with a voucher for a free pair of glasses.

The shocker—a considerable portion of the vouchers did not get used, meaning a bunch of children still lacked glasses even though the need had been identified and the solution paid for. Schools, public health departments, Medicaid administrators, insurance companies and policymakers were all holding different pieces of the puzzle but not working together to solve the problem.

There had to be a better way.

Building the Model

The problem seemed clear, so I asked Denita to help me start an organization to do something about this. We decided to take the help to where the kids are most days, just like the bookmobile of my youth back in Michigan had come in search of readers at school.

I placed a call to John Deasy, then Superintendent of LA Unified, and offered to provide free glasses for students at schools in the district. Bureaucracy threatened to stop us in our tracks by way of a lengthy draft memorandum of understanding (MOU) they sent us. An MOU sets forth the rules of the road for community partners to operate at schools, but LA Unified's was an outlier. Fortunately, the LA Unified bureaucracy was not present in other school districts, as most MOUs are simple agreements of just a few pages. Vision To Learn has since entered into agreements to help students at more than 4,500 school sites in 260 school districts around the country (School Districts Across the Country).

We found an unused mobile eye clinic at King Drew Hospital which had purchased the vehicle but found they had no money to operate it. We bought it at a meaningful discount and quickly put it to good use. We hired a few clinicians and started providing kids with a vision screening, eye exam, and if they needed them, a free pair of glasses. No questions asked (The Early Days).

What started out as a small pilot quickly grew into an ongoing effort. I asked Mickey Kantor, former United States Trade Representative and Secretary of Commerce, to come on board. We

were soon joined by others who brought their extraordinary talents to help including Antonia Hernández from the California Community Foundation, Pat Butler, Assistant Chief in the Los Angeles Fire Department, Jake Winebaum, a successful serial entrepreneur, and Cynthia Watts, an attorney serving as the legal and financial conscience for several start-up companies, and set out to build an organization that was cost-effective, scalable and sustainable.

Impact

It was obvious the children needed glasses, but we wanted to dig a little deeper to understand the impact our effort was having. We asked UCLA health experts Dr. Wendelin Slusser and Dr. Rebecca Dudovitz to conduct an independent assessment of Vision To Learn. Their study included focus groups at schools with students, their families and teachers. What they found was eye-opening.

Uncorrected vision issues resulted in poor focus and less class participation, as well as classroom disruptions. Children spoke of physiological problems like headaches, stress and eye pain.

The kids who got glasses demonstrated increased confidence and class participation, improved academic performance, more ease with homework, and improved focus and classroom behavior.

Their families couldn't afford to get help, if they could find it. Ninety-two percent of teachers and ninety percent of parents felt the children would not have had access to glasses without Vision To Learn.

The UCLA researchers repeatedly heard how students' classroom performance improved. Children approached their schoolwork with more confidence and had more success (UCLA Study).

One student summed it up: "When I didn't have glasses, I had bad grades and my mom and dad weren't happy."

Families reported a huge sense of relief. They could now understand their kids' previous academic struggles and anxiety about school. In the words of one parent: "The teacher told me that now I don't have to try to keep [my daughter's] focus.... Now she sees and tries, and I don't have to be after her like before." Another spoke of the anxiety her child felt about going to school, "Why didn't he sleep? Why was he scared? I didn't know that it was because of his vision."

The teachers surveyed were equally enthusiastic, saying that the students who got glasses not only learned more but also became more active leaders in the classroom. "A couple of the really shy kids started participating more.... They started coming out of their shell," observed a teacher.

Another teacher reported: "I had about six kids that received glasses, and these are the kids [who] were distracting other kids, socializing and you know I just couldn't get it.... But when they got the glasses, that kind of just changed; it went away."

Helping so many students at the same time has another benefit. When multiple students get glasses at the same time, the old "four-eyes" stigma loses its power. The kids with glasses become the cool kids. As one teacher reported, the students "are always wearing their glasses, they are proud to wear them. It's ... a fashion statement."

Students told the UCLA researchers they could see the lines of wood on their desks, a tree in the distance out the window and the grains in a bowl of rice, all things that they did not know existed before.

More About the Impact

We are fortunate to have great local partners in each community Vision To Learn operates. In Baltimore, we work with the city's public health department, Johns Hopkins University, Warby Parker (founded by a JHU grad) and several local foundations. Johns Hopkins agreed to take a careful look at Vision To Learn's work in Baltimore. Health experts Dr. Megan Collins and Dr. Michael Repka and nationally renowned education experts Dr. Bob Slavin and Dr. Nancy Madden conducted a cluster randomized clinical trial in Baltimore Public Schools during the school years 2016-19, the most comprehensive study ever about the impact of providing children with glasses.

2,304 students in grades 3 to 7 were provided with eye exams and glasses. The study included 964 students from 41 schools in the first annual cohort, 775 students from 41 schools in the second cohort, and 565 students from 38 schools in the third. 77% were Black students, 17% Latino and 18% were enrolled in special education.

The research was published in The Journal for the American Medical Association of Ophthalmology by the Center for Research and Reform in Education and the Wilmer Eye Institute at Johns Hopkins University (JHU Study). Children who received glasses did better in school and the impacts were greater than more costly measures such as lengthening the school day, providing computers, or creating charter schools. The children who showed the biggest gains, the equivalent of an additional four to six months of learning, are those who are often the hardest to help — students in the bottom quarter of their class academically and students with learning differences and disabilities.

A bit of context for those less familiar with how academic progress is measured. Grade-level means a student has mastered the learning standard for their particular grade, whether in literacy, math, or otherwise. A gain of six months is extraordinary, implying a student will have caught up or moved ahead a full one-half school year. That's a big jump for a 3rd grader, for example, who's only been in school a couple of years.

A Cost-Effective Approach

Vision To Learn's costs are less than \$150 per child for everything—vision screenings and eye exams as well as providing and fitting the glasses. The cost of a single patient visit for eye care at traditional brick-and mortar clinics and hospitals is three to four times greater than that amount.

We learned pretty quickly that driving large mobile clinics isn't easy. I received a call one afternoon that led to me to ask the question, "Was the tree or the clinic moving when the dent occurred?" So, we started using smaller vans. Vision To Learn now operates 50 vans which are easier to park, get better gas mileage, and cost less to operate (Our Mobile Clinics). Each of the vans is fitted on the inside with all of the equipment you would see at an optometrist's office—from a phoropter to a cool-looking chair the patients sit in (Inside the Van).

Vision To Learn staff know what the average number of children served is in Atlanta each week and how that compares to Des Moines or Honolulu. And why our costs are \$128 per child in Los Angeles compared with \$145 in Washington, D.C. We learn from mistakes and better practices can be shared from Newark to San Jose, or vice versa.

It surprises many to know that the glasses themselves, frame and lens, are less than 10% of our costs.

Far and away the biggest investment we make is in people. Vision To Learn has a great team of about 200 people across the country committed to the mission of helping kids. The organization has the capability to hire and oversee properly licensed clinical staff and provide them with additional training for work in school settings. And, yes, this includes a course on how to safely operate the vans.

All of this leads to cost-effective operations to ensure our limited dollars go to help as many kids as possible.

Philanthropy Eyes a Good Investment

Vision To Learn has been recognized for its impact by many respected organizations including the United States Senate, California Teachers Association, Campaign for Grade-Level Reading, and Obama White House (Recognition for Vision To Learn).

The Beutner Family Foundation provided the funding to start Vision To Learn and has continued to support it each step of the journey. We are fortunate to have been joined along the way by other foundations, individuals and businesses at the national and local level.

Some supporters took a risk in the early days when one could see the smile on a child's face who got glasses but we did not yet know the full measure of the impact. Others came on board

once the research showed the difference glasses make for kids in school. And some are supporting the path to sustainability and the pioneering work Vision To Learn is doing with Medicaid reimbursement across the country.

All who support Vision To Learn can see that every dollar they contribute leads directly to helping children. And they know that \$150 will change the life of a child, forever. Vision To Learn's impact is guaranteed. The moment a child puts on their glasses they see the world in a whole new way.

We've worked hard to expand our reach and build a wonderful group of supporters, but a big question, since we started, is how to make the effort economically sustainable over the long term. Private donations alone would not be sufficient to provide help to the millions of children who need it.

<u>Sustainability</u>

As luck would have it, a lunch in the fall of 2012 with then Congressman, Henry Waxman, gave me the chance to talk about Vision To Learn. For many years, most federal healthcare legislation in the United States was authored by Ted Kennedy in the Senate and Henry Waxman in the House. Henry, an expert on healthcare policy, made an observation which provided the clue to our long-term sustainability. "Austin," he said, "you don't have to pay for the whole thing. The vast majority of the kids you help are from families which are Medicaid eligible, and Medicaid includes funding for this. It has for a long, long time. A meaningful portion of Vision To Learn's costs ought to be reimbursable." Henry's counsel planted the seed for us to develop a reimbursement effort in states across the country.

We started to pursue Medicaid reimbursement in California with the help of Dave Jones, then State Insurance Commissioner. He set up a meeting for us with the heads of the two biggest Medi-Cal (Medicaid in California) insurers in Los Angeles, HealthNet and LA Care. We quickly recognized that despite California's bright blue progressive glow, we would have difficulty getting the healthcare establishment to help. A couple of big obstacles with insurance companies and optometric associations stood in the way.

Many Managed Care Organizations (MCOs) subcontract the vision care portion of their work to eye care MCOs. And the eye care insurers had a huge incentive not to help. They are paid for 100% of covered kids. If 25% of kids were provided with glasses, their profits would be lower. If none of the kids got glasses, their profits were higher. In addition, their billing systems were set up to deal with healthcare providers which only dealt with patients who could provide a Medi-Cal ID at clinics with a known location. This approach is intended to prevent fraud including duplicate payment for services. It works well in most circumstances but not when you want to help kids in a low-income community. They don't come to school with Medicaid IDs.

Optometric associations saw ghosts, fearing they would lose patients or Vision To Learn might lead an Amazon-like disruption of the existing brick and mortar eye care system.

Again, fate intervened.

Over breakfast with Wendy Greuel, former LA City Controller, I shared how we were looking to expand Vision To Learn to another state where we might have more success in Medicaid reimbursement. A smaller state would be more nimble and perhaps have a more responsive healthcare system. As luck would have it, Wendy's husband, Dean, was close with Senator Chris Coons of Delaware, the ideal such state.

She arranged for me to have lunch with Senator Coons and his Chief of Staff on their next trip to Los Angeles. I chose Shutters in Santa Monica, a beautiful, outdoor spot on the beach to set the mood and brought along my daughter who was about 10 years old at the time. She buried her nose in a book and I didn't think she was paying much attention throughout the two-hour discussion.

On the ride back to our house, I asked her thoughts. "It was nice" she said, "When did Mr. Coons come to work for Vision To Learn?" Puzzled, I asked her to clarify what she meant. "Well, he took all the notes, and it seems like he is going to do all the work."

Senator Coons became our champion. He hosted a dinner for me in Wilmington with the Governor of Delaware, the head of the state teacher's union, the state Medicaid director and the leader of the state legislature. My first observation was that, different from California, nobody brought along a food taster because they trusted each other. Second, they stayed through the entire dinner, rolled up their sleeves and everyone agreed to help (Senator Coons, Champion for Vision To Learn).

Delaware worked with Vision To Learn to become the "First State" to put in place a comprehensive Medicaid reimbursement system for vision services at schools in low-income communities, allowing Vision To Learn to start building a path to sustainability.

This early success created a false sense of optimism. Vision To Learn has faced the same issues at the state level time and again across the country. In most states where we operate we have had to work to change laws and rules, educate partners, and build pathways to Medicaid reimbursement (VTL Leads the Way).

The progress in Delaware solved only one part of the reimbursement puzzle—children with readily available Medicaid IDs.

Vision To Learn's goal is to help 100% of kids at a school in a low-income community, no questions asked. The approach is sound—any barrier, including the need for a low-income family to be properly enrolled in Medicaid and their child to present a valid ID at school—will mean some portion of kids don't get care.

Vision To Learn provides care to all of the kids at a school and then sorts out how to pay for it. Let's look at a hypothetical example. Five hundred kids at Smith Elementary are provided with a vision screening, 175 of them don't pass and will receive an eye exam and 150 children will wind up being provided with glasses. Schools have extensive enrollment data on the economic circumstances of the families they serve, so it's known if all of the children at a school are Medicaid-eligible. And it's safe to assume no child from a more affluent community snuck into Smith Elementary that day for the opportunity to get free glasses. Vision To Learn incurs the cost up front to provide vision screenings, eye exams and glasses for all of the children.

Vision To Learn then works with state health administrators and insurance companies to access various databases and try to match the student names with Medicaid rosters.

The matching of names with Medicaid rosters sounds simple, but it's not. Vision To Learn had to build a unique software system which can certify each of the clinical steps required by Medicaid for a proper eye exam (which varys by state) and then access the enrollment data from different state and insurer databases. Unfortunately, there is no off-the-shelf system which can do this. We had to bring in experts and commit a significant amount of time and money to create a new billing system that not only works but is compliant with federal and state laws covering patient privacy and health records. Vision To Learn's pioneering work in this area has increased the rate of matching in Delaware from 45% to 75% since we began using the specialized billing system.

CHIP Supplements Medicaid

Medicaid reimbursement for 75% of students is still not 100% of the children Vision To Learn has incurred the cost to provide with care.

We are fortunate to have Cindy Mann on our team, a brilliant lawyer who was the former head of the U.S. Center of Medicare and Medicaid Services. She came up with an innovative approach to provide for reimbursement to cover the costs of helping the remaining children from low-income families who can't be found on a Medicaid roster.

Cindy pointed us to legislation from 1997 which created the Children's Health Insurance Program, or CHIP, the goal of which is to make sure the health needs of children don't fall between the cracks. She knew a portion of each state's CHIP dollars could be used to "focus on improving the health of eligible children," and that vision care for kids from low-income families could properly qualify. A further look showed almost every state had significant reserves of unspent monies set aside in this area. Her proposed solution was that each state could establish a Health Services Initiative (HSI), using CHIP funds, to provide the funding for eye care efforts like Vision To Learn.

Mickey Kantor, Vision To Learn Board Co-Chair, and Ann Hollister, who runs the day-to-day operations of Vision To Learn, sprang into action and arranged for us to meet with leadership at the U.S. Department of Health and Human Services (HHS). Ann's warm personality masks a

steely determination to get the job done. She has extensive experience working in government at the federal level and knows how to navigate the corridors of most agencies. The team at HHS quickly agreed with Cindy's assessment. Months later, and after lots of hard work by many people, Delaware received an administrative ruling signed by Sylvia Burwell, then Secretary of HHS, that authorized a CHIP HSI. Subsequently, this same approach has been used in Hawaii, Mississippi and, most recently, Pennsylvania (Innovative Approach with HHS).

Vision To Learn Adds to the Team

One day I received a call from the producer for Brian Williams, then the anchor of NBC Nightly News. Certain it was a friend calling in jest, I hung up. Turns out it was for real. In short order, I was sitting with a reporter at Shenandoah Street Elementary School in Reynier Village, Los Angeles, filming a segment for NBC.

Steve Lopez is a veteran columnist for the LA Times whom I met while serving as First Deputy Mayor. He called me one day for my thoughts on the mayor's race. We agreed the most convenient way to have the conversation was to meet at Dolores Mission School, where Vision To Learn would be helping kids. Father Greg Boyle, the visionary founder of Homeboy Industries, an innovative gang intervention and rehabilitation program, and a member of Vision To Learn's California Advisory Board, would also be with us at the school since he had long served the parish.

Once Steve heard from Father G, saw what Vision To Learn was up to, and heard the reactions of the students' getting glasses, he quickly lost interest in my thoughts on the mayor's race. He did, however, write a beautiful column about the kids he met at school that day (Giving Kids a View to a Better Future). Steve's article had inspired Brian Williams' producer to take a closer look at Vision To Learn.

We continued adding sponsors and partners including professional sports teams. At Castelar Elementary School, Ned Colletti, then General Manager of the Dodgers, led the way by bringing along first baseman James Loney and pitcher Brandon League. They visited the school, took photos with the kids and helped show off our van to build awareness for our new effort.

Unfortunately, Vision To Learn soon picked up Sport's Illustrated "Cover Curse." It started with Loney – even with the proper glasses he had trouble hitting a curve ball – and continued when Brandon League couldn't get anybody out. But there they were pictured grinning on the side of the Vision To Learn van.

Not long thereafter, the Clippers and Paul Pierce joined us at his alma mater, Inglewood High. The kids loved it. Then Paul up and retired.

Chris Paul's smiling face rode around Long Beach on our van before he left for Houston.

We held a big event at Lovelia P. Flournoy Elementary School in Watts with the Clippers soon after they had re-signed Blake Griffin and put his picture on all of our LA vans. Neil Everett from ESPN was kind enough to join us and feature Vision To Learn on Sports Center that evening. Within days, Blake was traded to Detroit.

Tobias Harris' was plastered on the side of our van in Detroit. He came to LA in the Clippers trade, swapping places with Blake. It was nice that both players stayed within the Vision To Learn family.

All kidding aside, we're grateful for the support from many teams and their players. The teams' financial contributions have enabled us to help many more kids and, importantly, the players give the kids confidence to wear their glasses (A Great Team).

As then-Steeler JuJu Smith-Schuster showed on the front page of the Pittsburgh Post-Gazette, the students with glasses "are the cool kids now" (The Cool Kids).

Vision To Learn has also established great partnerships with other community-based organizations.

Rotary Club members, in an effort led by our super volunteer Nora MacLellan, have volunteered thousands of hours to help provide vision screenings and raised funds to support our efforts.

Jan Sobel, a member of our California Advisory Board, created a plan to work closely with Boys and Girls Clubs with a particular emphasis on summer when students are not in school. We have helped children at 258 clubs across the country.

Insurers Help with Reimbursement

Insurers have begun to recognize the value of the work Vision To Learn is doing and are helping navigate the reimbursement process.

MetLife, through its Davis and Superior eye care operations, has been working with Vision To Learn for eight years in six states to make reimbursement easier. The MetLife Foundation also recently made a large grant to help Vision To Learn serve more children across the country. And in perhaps the strongest validation of the shared efforts, MetLife employees have chosen Vision To Learn for several years running as the nonprofit organization they wish to direct their charitable contributions to and support with their volunteer efforts.

Vision To Learn now has reimbursement agreements in place with 67 insurers in 13 of the 15 states in which we operate (Insurance Companies Help Access Medicaid).

While we've made great progress, the data show another dimension of the challenges that still lie ahead. Medicaid reimbursement rates vary wildly from state to state. It makes little sense

that insurers in California, with its high cost of doing business, will pay barely more than 1/3 of that paid in North Carolina for the same service to help a child.

The issue of varying state standards starts well before Vision To Learn arrives at a school. A quick look at state standards for vision screenings, where it all starts, shows very different expectations of care for children (State Standards of Care are Different). Some mandate vision screenings in just about every grade while others have no requirements. Vision To Learn has set its own standard to make sure 100% of children at any school we serve are provided with a vision screening.

All Means All

We're often asked to reconcile a few figures. Vision To Learn has provided more than two million children with vision screenings, but only 330,000 or about 19% of them wound up with glasses. Why's that different from the 25% who should have received them?

Unfortunately, when a child does not pass a vision screening at school, Vision To Learn cannot always provide that individual with an eye exam and glasses. Ambiguous, old rules about school-based health services are interpreted differently by school districts. Some have strict policies which, while they will allow students to be provided with a vision screening, do not allow an eye exam without written consent of a family member only after they've seen the results of a vision screening. We refer to this approach as "Opt-In." As any experienced school staff member will tell you, all of the children do not return signed permission slips to schools, whether for a field trip or an eye exam. Despite heroic efforts by Vision To Learn staff alongside their school counterparts, only about 50% of children who do not pass a vision screening will typically be able to get an eye exam under the Opt-In approach.

Vision To Learn has led the way with many of our school district partners to solve this problem by implementing an "Opt-Out" approach. Schools incorporate the permission for eye exams into the enrollment paperwork every family completes for their child at the beginning of the school year. This says, in simple terms, "If your child does not pass a vision screening, the school (and its partner, Vision To Learn), may provide an eye exam and glasses if needed." If the family says no, they have opted out. Since the eye exam is non-invasive and there is no cost to the school student or their family, nobody is at risk and very few families Opt-Out.

The best part—Vision To Learn is able to provide 99+% of children who do not pass a vision screening with an eye exam using the Opt-Out approach. And they'll be provided with glasses if they need them.

It's worth noting that the portion of children provided with a vision screening by Vision To Learn who need glasses often exceeds the AOA's estimate of 25%. In this school year, for example, 30% of children needed glasses in Charlotte, 34% in Lansing, 26% in Riverside, and 32% in Philadelphia.

More than Glasses

A proper eye exam can also identify other health issues beyond the need for corrective lenses. These can range from vision-related issues, like amblyopia (commonly known as lazy eye) and strabismus (crossed eyes), to diabetes.

Vision To Learn works closely with major healthcare providers in all of the communities we serve to help children get access to care for these other issues. For example, in the 15 or so months since we started in Charleston, we have provided 2,141 children with glasses and 246 were referred to local providers for additional care. One of our clinical partners, Medical University of South Carolina, treated children we referred with severe glaucoma and diabetes.

While the numbers vary by community, about 10% of children provided with an eye exam by Vision To Learn are referred to our clinical partners for additional care. None of these health issues would have been identified without the eye exam the child received from Vision To Learn.

Something We Can All Agree On

Our country faces many challenges including how we can create a more just and equitable society. An important part of the answer is a good, public education for children which is the path out of poverty for many and the promise of opportunity for all.

More than 90% of children helped by Vision To Learn are from families who live in poverty. 85% of them are Black and Latino. Providing these children with glasses will help them to get the most out of their education.

This is just one reason Vision To Learn has gained the support of Democratic and Republican leaders across the country.

Vice President Kamala Harris, then California Attorney General back in 2014, in Oakland, CA, noted:

"Vision To Learn is providing services to the hardest-to-reach, poverty-stricken communities throughout California and today they bring this critical service to Oakland schools. I applaud Austin's leadership in creating Vision To Learn and his whole team for the work they are doing to help so many kids across the state."

While more recently Senator Tim Scott in Charleston, SC, said:

"I can't think of anything simpler than ensuring that kids are able to see what they are learning... This remarkable program provides students with the critical tool (glasses) for success and I'm proud to support it."

Educators also see the difference Vision To Learn is making. Randi Weingarten, President of American Federation of Teachers, joined us at a school in Washington, D.C. saying:

"Unfortunately, in underserved communities, most children who need glasses can't get them because of financial constraints, language barriers, unresponsive health bureaucracies or the simple fact there are no eye care professionals in their neighborhood. Vision To Learn solves the problem by bringing the glasses to the kids where they are almost every day—their local neighborhood school."

The broad, bipartisan support Vision To Learn has received across the country is based on a simple premise we can all agree on—every child should have the glasses they need to succeed in school and in life.

Path to Recovery

COVID brought unprecedented challenges to schools and the children they serve. When school facilities were closed, Vision To Learn quickly pivoted to helping our local partners in community relief efforts. We took the medical equipment out of the vans and started delivering food and other critical supplies in Los Angeles to help students and their families along with the Clippers and Dodgers (Relief Efforts). In Philadelphia, doctors and nurses at Thomas Jefferson University Hospital used our clinic as a much-needed relief center during the early days of COVID. In Charlotte, we helped provide more than 8,000 meals (Relief Efforts) to families in need thanks to the committed leadership of local heroes Renee and Hugh McColl and program manager Queen Smalls.

Once school classrooms reopened for students, Vision To Learn was there to help. Vision To Learn has since worked alongside many local municipal agencies and school districts in the communities we serve and quickly put federal COVID relief dollars to work helping kids.

40,000 more children are getting the glasses they need because the Vision To Learn team was able to work quickly, and effectively, alongside our local partners to access COVID relief funds (Federal Relief Funds Helping Kids).

Coverage is Not Access

A consistent challenge for Vision To Learn is to help federal and state leaders understand there is a difference between coverage and access for healthcare in low-income communities.

Policymakers will tell us that vision care for children is a covered service under Medicaid and, therefore, the problem has already been solved. Unfortunately, that's not true. The experience across the country has been similar to Vision To Learn's Los Angeles Medi-Cal pilot in 2015-18 which showed that among the 22,000 kids we helped, 68% had not used their Medi-Cal benefits in the previous four years and 81% had coverage that was not used in the past year.

Policymakers have missed the mark. Coverage does not mean access.

Take Detroit and Baltimore, for example where public health departments keep extensive records of the vision screenings they conduct. The Detroit health department knew the number of kids who did not pass vision screenings—and yet less than 3% of those that failed vision screenings subsequently got eye exams. Unfortunately, the health department did not have the staff or funding to provide eye exams and glasses, only vision screenings.

We run into laws that were written a long time ago, intended to protect against bad actors in the optometric field. The laws protect the link between optometrists, the providing of glasses and the business model from years ago. Nobody imagined a nonprofit would provide free glasses to kids at schools in low-income communities. Because of this, some state optometry boards do not know how to treat us since we do not fit within their existing model.

In some states, we have run into opposition from the optometric community fearing we undermine the brick-and-mortar optometric service system.

Vision To Learn is not a threat to the current healthcare system or any provider. We hire properly licensed clinicians at a market wage and help children who have not had access to eye care. We are finding new patients and bringing them into the healthcare system.

In South Carolina, an old law said mobile optometry units could only operate next to a hospital. Well, schools aren't hospitals and most hospitals are a long way from schools and the families they serve. In 2021, we got permission to run a one-year pilot in Charleston schools. After seeing how Vision To Learn could address the extraordinary need in low-income communities, the state legislature soon authored and the Governor signed legislation which now allows Vision To Learn to operate at schools across the state.

In California, we have run into bureaucracies with different, conflicting rules. An old rule said mobile clinics affiliated with optometry schools were allowed to receive reimbursement from Medicaid. In 2020, we got the law changed to allow for reimbursement if mobile clinics are operated by nonprofits which serve children in Title I schools. Soon thereafter, another issue arose. The California State Board of Optometry has long required Vision To Learn to work with optometrists as independent contractors which we did. But when new legislation, AB5, passed in 2019 our affiliated eye care professionals no longer met the standard for independent contractors set forth in the new law. Vision To Learn winds up stuck between two conflicting laws and departments. The California state bureaucracy needs to share the same sense of urgency we do to solve the issue so kids can quickly get the glasses they need.

The Path Forward

Vision To Learn's goal is to make sure every child in every school, everywhere in the country has the glasses they need to succeed in school and in life. Mobile services solve the problem by bringing eye care professionals to provide vision screenings, eye exams and glasses to children

at schools in low-income communities, at no cost to children or their families. Vision To Learn now helps children in more than 750 cities from Honolulu to Newark and has become the largest school-based program of its kind in the nation (Helping Children Across the Country). In 2022 alone, Vision To Learn will provide more than 100,000 kids with glasses they need and did not have.

One mighty, little non-profit has done what government could not do and created a cost-effective, bipartisan and sustainable approach to solving the problem.

But we're not yet where we want to be. Far too many children still go to school every day without the glasses they need.

In May 2022, First Lady Jill Biden visited Panama and helped put glasses on school children. She's an educator who understands the need to make sure children in low-come communities are provided with help. The Biden Administration could make a big impact closer to home by supporting efforts in Wilmington, Delaware, where Vision To Learn has provided more than 14,000 kids with glasses.

The paradigm has to shift. Federal and state leaders need to acknowledge the problem exists in low-income communities across the country as well as their responsibility to fix it.

One place to start could be a directive from the White House, supported by the Departments of Health and Human Services and Education, which states simply, "By the start of school in August 2023, every state must have a plan in place to make sure 100% of school kids who need glasses have them."

A White House directive alone won't solve the problem. But it will draw attention to the issue and create a greater sense of urgency at the state and local level to make sure it gets solved. They should all listen to Dametrius Dyson from Philadelphia:

"When I put them (my glasses) on I see everything so clearly. I like it... I can finally appreciate the world and this is just incredible...I can actually see now."

Vision To Learn is one solution and there are others. Irrespective of the solution, the goal has to be to make sure every child in every school, everywhere in the country has the glasses they need to succeed in school and in life.

That's our mission at Vision To Learn and we'll keep working to make sure that is accomplished.

Austin Beutner Founder, Vision To Learn

The Need



12 million students

NATIONWIDE ATTEND HIGH POVERTY SCHOOLS



25% of children

NEED GLASSES



80% of children

COVERED BY MEDICAID DO NOT RECEIVE REGULAR VISION CARE

School Districts Across the Country

California

Alameda Unified ABC Unified Alhambra Unified

Alum Rock Union Elementary

Alvord Unified Anaheim Elementary Archdiocese of Los Angeles

Archolocese of Los Ange Azusa Unified Baldwin Park Unified Bellflower Unified Benicia Unified Bishop Unified Campbell Union Coachella Valley Unified

Compton Unified

Compton Unitied

Cotati-Rohnert Park Unified

Desert Sands Unified
Downey Unified
East Side Union High
Eastern Sierra Unified
Education for Change Public
El Monte City Elementary
El Monte Union High
Elk Grove Unified
Emery Unified

Galt Joint Union Elementary Hacienda la Puente Unified

Hawthorne
Hayward Unified
Hemet Unified
Inglewood Unified
John Swett Unified
Jurupa Unified
Lake Elsinore Unified

Franklin-McKinley

LA's Best

Lawndale Elementary

Lennox

Long Beach Unified

Los Angeles County Office of

Education

Los Angeles Unified Lynwood Unified Mammoth Unified Menifee Union Elementary

Monrovia Unified Montebello Unified

Moreland

Moreno Valley Unified Mountain View

Mountain View Whisman Mt. Diablo Unified Natomas Unified

New Haven Unified

Norwalk-La Mirada Unified

Nuview Union Elementary

Oak Grove
Oakland Unified
Oceanside Unified
Oroville City Elementary
Palm Springs Unified
Paramount Unified
Pasadena Unified
Perris Elementary
Pittsburg Unified
Pomona Unified
Ravenswood City

Red Bluff Union Elementary Redondo Beach Unified

Redwood City Rialto Unified Riverside Unified

Robla
Rocketship Public
Romoland Elementary
Sacramento City Unified
San Diego Unified
San Francisco Unified
San Jose Unified
San Juan Unified

San Leandro Unified San Lorenzo Unified San Mateo-Foster City Santa Clara Unified Santa Cruz City Sunnyvale

Torrance Unified Val Verde Unified Wiseburn Unified

Sylvan Union

Connecticut

Ansonia Public East Hartford Public East Haven Public Thompson Public Winchester Public

Delaware

Appoquinimink Brandywine Caesar Rodney Cape Henlopen Capital Christina Colonial

Great Oaks Charter Indian River Laurel

Milford

New Castle County Vo-Tech

Red Clay Consolidated

Seaford Woodbridge

Georgia

Atlanta Public
Clayton County Public
DeKalb County
Division of Family and Children
Services
Fulton County
Gwinnett County Public
Marietta City

Hawaii

Hawaii State Department of Education

lowa

Allamakee Community Anamosa Community **Andrew Community Bellevue Community Central Community** Clayton Ridge Community Clinton Community Des Moines Public **Dubuque Community Easton Valley Community** Fort Dodge Community Maquoketa Community Maquoketa Valley Community MFL Marmac Community Midland Community Monticello Community Olin Consolidated Postville Community Storm Lake Community Waterloo Community West Delaware County Community West Des Moines Community West Liberty Community

Louisiana

KIPP Charter School

Western Dubuque Community

Maryland

Baltimore City Public Kent County Public

Michigan

Authority Avondale Beecher Community **Big Rapids Public**

Central Michigan University Center Cesar Chavez Academy District

Chippewa Hills

Detroit Education Achievement Detroit Public Schools Community

District Ecorse Public Evart Public Flint Community

for Charter Schools

Grand Rapids Public Integrity Educational Services

Kalamazoo Public Kalamazoo RESA

Lansing

Lighthouse Academy

Morley Stanwood Community National Heritage Academy

New Paradigm

Mississippi

Jackson Public

North Carolina

Charlotte-Mecklenburg

New Jersey

East Orange Elizabeth Public

Great Oaks Legacy Charter

Irvington Public
Jersey City Public
Newark Public
Orange Public
Paterson Public
Soaring Heights Charter

Team Academy Charter

Ohio

Athens City Austintown Local Belpre City

Bristol Local

Caldwell Exempted Village

Cambridge City Chillicothe City East Guernsey Local Eastern Local Federal Hocking Local Logan-Hocking

Nelsonville-York City

New Lexington

New Philadelphia City

Niles City Noble Local Rolling Hills Local Southern Local Vinton County Local Wellston City Western Local Zane Trace Local

Zanesville City

Pennsylvania

Aliquippa Armstrong Baldwin-Whitehall Brentwood Butler Area Carlynton

Chambersburg Area Champion Christian School

Chichester Clairton City Cornell Deer Lakes Duquesne City East Allegheny Erie Public Gateway

Greater Johnstown Harrisburg Highlands Laurel Highlands McKeesport Area New Kensington-Arnold

Newport Penn Hills Pittsburgh Public Pottstown Propel Schools

School District of Lancaster

Shaler Area South Allegheny Southeast Delco Steel Valley Steelton-Highspire

Reading

The School District of Philadelphia

Trinity Area
Tulpehocken Area
Upper Darby
Washington
Wilkinsburg
William Penn
Woodland Hills
York City

South Carolina

Charleston County

Virginia

Richmond Public

Washington DC

District of Columbia Public

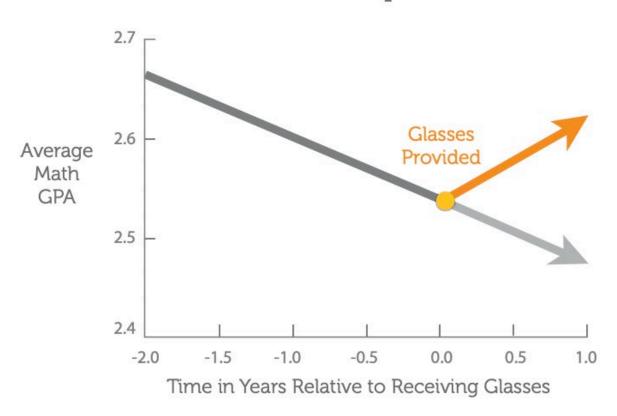
The Early Days



UCLA Study

Mattel Children's Hospital UCLA

Grades Improve





JAMA Ophthalmology

JAMA Ophthalmol. 2021;139(10):1104-1114. doi:10.1001/jamaophthalmol.2021.3544 Published online September 9, 2021.

Effect of a Randomized Interventional School-Based Vision Program on Academic Performance of Students in Grades 3 to 7 A Cluster Randomized Clinical Trial

Amanda J. Neitzel, PhD; Betsy Wolf, PhD; Xinxing Guo, MD, PhD; Ahmed F. Shakarchi, MBBS, MPH; Nancy A. Madden, PhD; Michael X. Repka, MD, MBA; David S. Friedman, MD, PhD, MPH; Megan E. Collins, MD, MPH

+

IMPORTANCE Uncorrected refractive error in school-aged children may affect learning.

OBJECTIVE To assess the effect of a school-based vision program on academic achievement among students in grades 3 to 7.

DESIGN, SETTING, AND PARTICIPANTS This cluster randomized clinical trial was conducted in Baltimore City Public Schools during school years from 2016 to 2019 among 2304 students in grades 3 to 7 who received eye examinations and eyeglasses.

INTERVENTION Participating schools were randomized 1:1:1 to receive eye examinations and eyeglasses during 1 of 3 school years (2016-2017, 2017-2018, and 2018-2019).

MAIN OUTCOMES AND MEASURES The primary outcome was 1-year intervention impact, measured by effect size (ES), defined as the difference in score on an academic test (i-Ready or Partnership for Assessment of Readiness for College and Careers tests on reading and mathematics) between intervention and control groups measured in SD units, comparing cohort 1 (intervention) with cohorts 2 and 3 (control) at the end of program year 1 and comparing cohort 2 (intervention) with cohort 3 (control) at the end of program year 2. The secondary outcome was 2-year intervention impact, comparing ES in cohort 1 (intervention) with cohort 3 (control) at the end of program year 2. Hierarchical linear modeling was used to assess the impact of the intervention. Analysis was performed on an intention-to-treat basis....

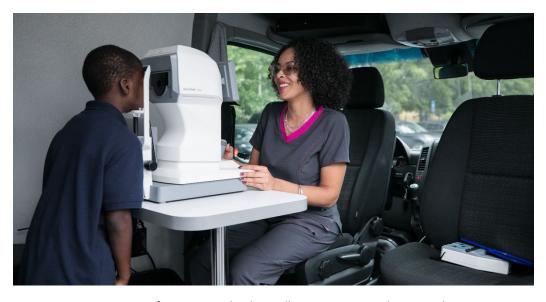
Our Mobile Clinics



Inside the Van



Optometrist at a Boys & Girls Club in Kalamazoo, Michigan

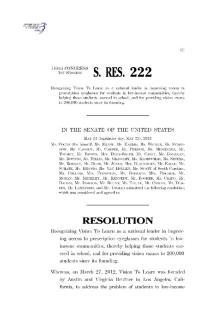


Optician using an autorefractor at Michael R. Hollis Innovation Academy in Atlanta, Georgia

Recognition for Vision To Learn

U.S. SENATE RESOLUTION 222 (2019)





"Recognizing Vision To Learn on its leadership improving access to prescription eyeglasses for students in low-income communities...."

Bright Spots in Hispanic Education Fulfilling America's Future - White House Initiative on Educational Excellence for Hispanics





"Vision To Learn was founded with the goal of mitigating the negative outcomes of poor vision in low income communities by coordinating screenings for children and supplying those in need with eye exams and glasses—an age-old yet critical tool for success."

California Teachers Association "State Gold Award"



"The UCLA results confirm what our teachers have been telling us – kids need to see the board and read the words on a page to learn. It's nice to see real results that will help improve public education in California."

-- CTA President Dean E. Vogel.

Campaign for Grade Level Reading "Pacesetter Program" Award



Reflecting Vision To Learn's "contribution to improving academic achievement and, with that, life prospects for young children in California."

Senator Chris Coons, Champion for Vision To Learn

Roll & Call

A Clear Opportunity for America's Children | Commentary

By Sen. Chris Coons and Austin Beutner November 5, 2014

As leaves turn and campaign season signals colorful change ahead, politicians at the local, state and national levels debate what works in education programs designed to improve academic outcomes for America's children.

And while both sides have our kids' best interests at heart, most of what they're debating is theory, spinning off educated guesses about the success or failure of ideas with little short-term application on the blackboard or the blacktop.

Something very different is happening in Delaware....

....Vision services for low-income children have been provided for under Medicaid for years. What has been missing is access to those services. Today, we have an opportunity for every state to ensure that mobile eye clinics, similar to those used in California, are reimbursed under Medicaid, too.

Turning that opportunity into reality will demand leadership from colleagues in the Senate and House, in state and local government, in city halls and in businesses across America. Together, we can ensure that our kids get the help they deserve so that they can compete in class, on the court, and in life.

Being a kid means not having to care about legislative calendars, ironing out policy disagreements or leveling balance sheets. That's our job. So let's do it, applying existing laws to give America's kids a clearer shot at a great future.

Sen. Chris Coons is a Democrat from Delaware. Austin Beutner is the founder of Vision To Learn.

Vision To Learn Leads the Way

<u>State</u>	Bill/Regulation	Year Passed	What it Does
California	LA County Medicaid Pilot	2015	Established 3-year pilot program in LA County for reimbursement of vision services for Medi-Cal kids
Federal	Letter from HHS Secretary Burwell	2017	Recommended states use CHIP HSIs to support school-based vision care
Delaware	CHIP Health Services Initiative	2017	Allows CHIP Administrative funding to support Vision To Learn
California	State budget appropriation of \$1 million	2018	State appropriation of \$1 million to expand service of LA County Medi-Cal pilot
Federal	Senate Resolution 222	2019	Recognized Vision To Learn as a national leader
Mississippi	CHIP Health Services Initiative	2019	Allows CHIP Administrative funding to support Vision To Learn program
California	LA Unified Board Resolution re: Opt out Consent	2020	Establishes opt-out consent for vision projects
California	AB 896	2020	Allows nonprofit mobile optometric offices to operate, receive Medicaid reimbursement
South Carolina	Budget Trailer Language to permit VTL to operate for 1 year	2021	Established VTL pilot program in Charleston County School District
California	Budget Trailer Language	2021	Confirming mobile optometric offices can bill Medicaid
Hawaii	CHIP Health Services Initiative	2021	Allows CHIP Administrative funding to support Vision To Learn
North Carolina	Letter of Understanding with NC Board of Optometry	2022	Confirmed VTL's ability to qualify for Medicaid reimbursement in NC
Ohio	ResultsOHIO Funding	2022	Funds Vision To Learn services provided in Appalachian Ohio over 3 years
South Carolina	House Bill 4387	2022	Allows charitable mobile optometric clinics to operate at Title I school sites
Maryland	State budget appropriation of \$1 million	2022	State appropriation to expand service in Baltimore schools
California	AB 2329	2022	Established opt-out consent as standard practice for school-based vision exams
Pennsylvania	CHIP Health Services Initiative	2022	Allows CHIP Administrative funding to support Vision To Learn program

Innovative Approach with HHS



THE SECRETARY OF HEALTH AND HUMAN SERVICES WASHINGTON, D.C. 20201

JAN 1 1 2017

The Honorable Christopher A. Coons United States Senate Washington, DC 20510

Dear Senator Coons:

Thank you for your letter expressing the need to ensure adequate access to vision services for low-income children. The Centers for Medicare & Medicaid Services (CMS) shares your concern about this issue and your commitment to ensuring that low-income children who have vision problems receive the services they are entitled to under the Medicaid program. We agree that this adequate access to vision services will help children succeed in not only school, but in life as well.

As you indicate, there are several pathways available using existing Medicaid and Children's Health Insurance Program (CHIP) authorities for organizations like Vision to Learn. One straightforward pathway is to enroll as Medicaid or CHIP providers' school-based clinics or nonprofits that provide vision services with qualified professionals. This approach would enable states to receive federal dollars for vision services furnished by these school-based providers to eligible children. Additional authority from CMS would not be required to the extent that such entities can be enrolled through existing processes as Medicaid providers. In addition, this approach could effectively be paired with an outreach strategy to enroll uninsured children who are Medicaid or CHIP eligible. For children already enrolled in Medicaid, the strategy also could address ways to ensure that the school based clinics or nonprofits can claim Medicaid or CHIP payment for any services provided to the child.

Subject to the availability of state CHIP funds, another potential approach is to create a health services initiative (HSI), which would enable a state to design a program tailored to best meet the vision needs of its low-income children. This approach may not be available to all states; however, claims for HSIs and administrative expenses cannot exceed 10 percent of the total amount of CHIP funds claimed by the state each quarter. Within the 10 percent limit, states must fund costs associated with administration – such as outreach activities and health services initiatives, stakeholder engagements, and eligibility determinations of the CHIP state plan. Any funds left over may be used for an HSI, subject to the 10 percent cap. We would encourage states pursuing this approach to also incorporate the enrollment and outreach strategies described above to ensure that low-income children eligible for Medicaid and CHIP are enrolled and providers can receive federal funding for providing Medicaid and CHIP services.

The Honorable Christopher A. Coons Page 2

Again, thank you for taking the time to write about this important issue. If you or your staff have questions, please feel free to contact Jim Esquea, Assistant Secretary for Legislation at (202) 690-7627. I will also provide this response to the co-signers of your letter.

Sincerely,

Sylvia M. Burwell

Los Angeles Times

Giving kids a view to a better future

BY STEVE LOPEZ FEB. 5, 2013

Bosko Magana, a 10-year-old fifth-grader at Dolores Mission School in Boyle Heights, began noticing about a year ago that her world was getting a little fuzzy around the edges. But eyeglasses didn't fit into the family budget.

Joanna Hernandez, 13, already had glasses, but for the last several months, they weren't strong enough.

"I couldn't see the board very well," she said.

Eugene Flores, 12, began noticing a year ago that when he looked to the right, "My eyes would take time to adjust."

On Monday morning, a mobile eye lab from Vision To Learn, a one-year-old nonprofit, rolled onto the Dolores Mission campus and students were called up, one at a time, to claim their new, free glasses. Bosko, Joanna and Eugene were among 31 students who got specs, and after a ceremony, some of their classmates lined up outside the van for eye tests....

....Father Greg Boyle, who was once assigned to the Dolores Mission Church, encouraged students to think more broadly about the word "vision." To some, it's the ability to read a book, to others, it's the dream of a community in which everyone matters equally, and help is provided to those in need....

....Inside the van, Beutner told me he met a teacher a couple of weeks ago who told him a story about a bright fifth-grader with an erratic academic record. The girl would test gifted one year, not the next, then gifted again, then not.

"They went back and looked, and it was a single-parent household. The mother was in and out of work, and when she could afford it, the kid had glasses, and when they couldn't afford it, they didn't have glasses," Beutner said. "A \$20 pair of glasses can change your life."

A Great Team







RAVENS



















dittsburgh Post-Gazette

\$2.00

231 YEARS OF SERVICE

SATURDAY, JUNE 2, 2018

VOL. 91, NO. 305, 6/2/18

FINAL

COVERAGE CLOSE TO HOME . Pittaburgh Post-Gazette . SATURDAY, JUNE 2, 2018

BUSINESS



Andrew Rush/R

Steelers wide receiver Juliu Smith Schuster takes a selfie with the 21 students at Pittsburgh King K-8 who received new glasses through the Vision To Learn Pennsylvania program on Friday,

Students get free glasses, celebrate with Steelers player Smith-Schuster

By Elizabeth Behrman Pittsburgh Post Gazette

tudents at Pittsburgh King K-8 gota reminder from a local celebrity that wearing glasses can be cool.

Steelers wide receiver Judu Smith-Schuster said he wore gasses as a kid, and they helped him in school, while playing sports and while playing video cames.

games. "I think it's very, very cool," he said

about wearing glasses.
Students at the North Side school gathered in the gymnasium Friday morning to celebrate the launch of a program that will provide free eye exams and glasses to Pittsburgh students who need them. At King, 21 students got the first pairs through the partnership between Pittsburgh Public Schools and Vision to Learn, a Los Angeles-based non-profit that aims to provide vision care to profit that aims to provide vision care to low-income children across the country. Mr, Smith-Schuster helped make sure

the new glasses fit and posed for a photo with each student.
"Everything's closer now," said 11-year-old Dion McCoy, who selected a pair of black and blue frames. Vision to Learn was founded in 2012 and now serves low-income communities in 256 cities in 13 states. Pittsburgh Public is the first school district the organization has partnered with in Pennsylvania. Eventually its leaders plan to take

SEE GLASSES, PAGE B-2

Twenty-one students get free glasses

GLASSES, FROM B-1

their services to schools in the surrounding districts and counties.

School nurses will continue to give each Pittsburgh student annual vision screenings, and the students who fail will be referred to the Vision to Learn mobile clinic, which will move from school to school. There the

Learn.
The organization cited research from Mattel Children's Hospital at UCLA that showed students who receive needed glasses perferment better includes. receive needed glasses per-formed better in school and were more engaged in the classroom. Students with intreated vision problems often struggle and are less likely to achieve reading perfectors, recording to proficiency, according to a

cent of those students will need glasses. The organiza-tion estimated that roughly 2,600 students in the city schools need glasses and don't have them, Ms, Hollis-ter said.

or the superintendent said.
"The superintendent said 'yes' in one minute," she said. "Hegot it."

Superintendent Anthony Hamlet said he wears contacts and urged students to

Helping Children Across the Country



Insurance Companies Help Access Medicaid

State	Number of MCOs	Reimbursement Rate
California	19	\$36.73 - \$40.81
Connecticut	1	\$75.03
Washington D.C.	1	\$82.20
Delaware	3	\$45.00 - \$104.62
Georgia	4	\$38.25 - \$52.95
Hawaii	7	\$48.16 - \$95.00
Iowa	3	\$48.94 - \$72.63
Maryland	8	\$30.00 - \$63.71
Michigan	2	\$58.24
North Carolina	4	\$99.66
New Jersey	5	\$22.00 - \$55.00
Ohio	1	\$48.18
Pennsylvania	10	\$30.00 - \$125.00

State Standards of Care are Different

<u>State</u>	Pre-K	<u>K</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>	<u>10</u>	<u>11</u>	<u>12</u>
California	X	✓	\checkmark	\checkmark	X	X	\checkmark	X	X	\checkmark	X	X	X	X
Connecticut	\checkmark	✓	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	X	✓	X	✓	X	X	X
Delaware	X	\checkmark	X	\checkmark	X	\checkmark	X	X	\checkmark	X	✓	\checkmark	X	X
Georgia	X	✓	X	X	X	X	X	X	X	X	X	X	X	X
Hawaii	X	✓	X	X	X	X	X	X	✓	X	X	X	X	X
Iowa	X	✓	X	X	\checkmark	X	X	X	X	X	X	X	X	X
Maryland	\checkmark	✓	\checkmark	X	\checkmark	X	\checkmark	X	\checkmark	X	✓	X	X	X
Michigan	X	✓	\checkmark	X	\checkmark	X	\checkmark	X	\checkmark	X	✓	X	X	X
Mississippi	\checkmark	✓	X	X	X	X	X	X	X	X	X	X	X	X
New Jersey	\checkmark	✓	X	\checkmark	X	\checkmark	X	\checkmark	X	\checkmark	X	\checkmark	X	X
North Carolina	✓	✓	X	X	X	X	X	X	X	X	X	X	X	X
Ohio	X	✓	\checkmark	X	\checkmark	X	\checkmark	X	\checkmark	X	✓	X	✓	X
Pennsylvania	X	✓	\checkmark	✓	\checkmark	✓	\checkmark							
South Carolina	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Virginia	\checkmark	✓	X	\checkmark	\checkmark	X	X	X	\checkmark	X	X	\checkmark	X	X
Washington, D.C.	X	✓	✓	\checkmark	\checkmark	✓	\checkmark	\checkmark	\checkmark	\checkmark	✓	\checkmark	✓	\checkmark

Relief Efforts



Our team in Atlanta providing food relief.



Our Philadelphia clinic was used by doctors and nurses at Jefferson Memorial Hospital for much-needed breaks during COVID.

Federal Relief Funds Helping Kids

State	Entity	Amount	Type	Kids Helped
California	Oceanside Unified	\$500,000	ESSER via Community Schools	3,333
California	San Francisco County	300,000	ARPA	2,000
California	San Lorenzo Unified ARP	60,000	Title IV and Access	400
California	San Mateo County ARP	300,000	Measure K Funding	2,000
Connecticut	Ansonia Public Schools	23,000	ARPA	153
Connecticut	East Haven	28,000	ARPA	187
Connecticut	Thompson Public Schools	20,000	ARPA	133
Connecticut	Vernon Public Schools	90,000	ARPA	600
Georgia	Fulton County Schools	800,000	CARES Act	5,333
Georgia	Fulton County Schools	200,000	District Funding	1,333
Georgia	Marietta City Schools	74,000	Mix of CARES and other	493
Iowa	Storm Lake ESSER	64,400	ESSER	429
Maryland	State of Maryland	695,000	ARPA	4,633
North Carolina	Mecklenburg County ARP	1,517,136	ARPA	10,114
New Jersey	Paterson School District	738,238	ESSER	4,922
Pennsylvania	Delaware County	200,000	ARPA	1,333
South Carolina	Charleston City School District	375,000	ESSER	2,500
South Carolina	Charleston County Community Investment Grant	8,750	ARPA	58
South Carolina	City of Charleston ARP	15,000	ARPA	100
		\$6,008,524	•	40,054