Using Medicaid Claim Data to Monitor Performance Measures for Children’s Best Vision Health
PATH TO HEALTHY VISION

SCREENING ➤ EYE EXAM ➤ TREATMENT

Routine vision screenings are important for a child’s growth and learning milestones. Children should receive vision screening:

FOR THE FIRST TIME AT 6 MONTHS OLD

AT LEAST ONCE BETWEEN 3-5 YEARS OLD

EVERY 1 TO 2 YEARS THROUGHOUT GRADE SCHOOL
Impacts of screening and follow-up care

Prevent early childhood blindness

Optimize development, learning and school success

Achieve 3rd grade reading proficiency
Medicaid claim data (Performance Measures)

- Proportion of children receiving vision screening
- Proportion of children with a neurodevelopmental disorder receiving timely eye exams
- Number of children receiving eye exams
- Number of children receiving eye exams after vision screening or well-child visit
- Proportion of children diagnosed with eye condition who receive treatment or additional visits to optometrist or ophthalmologist
- Proportion of children receiving vision screening conducted with an automated device

Each PM is reported by age, gender, race, health plan, zip and county

Several data limitations to consider
Gap from failed screening to eye exam

- **Screening**
  - 12% decrease since 2013
  - *EPSDT codes may be missing from Community Health Center claims between October 2015 to early 2017*

- **Eye Exams**
  - In 2017, only 14% follow-up rate
  - 6% decrease since 2013, but trend up 6% since 2014

- **Treatment**
  - 75% in 2017
  - Dependent on diagnosis and treatment plan
Number of children receiving vision screening conducted with an automated device

Over 1100% increase from 2013 to 2017 (1155 to 13,977);

In 2017, 71% of screenings using devices were conducted for children age 5 and younger
Targeted activities for early identification and treatment

1. Quality vision screening
2. Improved referral process to optometrist or ophthalmologist
3. Data and developmental evaluation
4. Awareness and action campaign