

PUBLIC HEALTH DEPARTMENT[641]

Notice of Intended Action

Twenty-five interested persons, a governmental subdivision, an agency or association of 25 or more persons may demand an oral presentation hereon as provided in Iowa Code section 17A.4(1)“b.”

Notice is also given to the public that the Administrative Rules Review Committee may, on its own motion or on written request by any individual or group, review this proposed action under section 17A.8(6) at a regular or special meeting where the public or interested persons may be heard.

Pursuant to the authority of Iowa Code section 135.39D, the Department of Public Health hereby gives Notice of Intended Action to adopt new Chapter 52, “Vision Screening,” Iowa Administrative Code.

Iowa Code section 135.39D establishes a vision screening requirement for children enrolled in a public or accredited nonpublic elementary school and directs the Department to adopt rules necessary to administer vision screening.

These rules strengthen existing efforts by implementing a comprehensive vision evaluation effort resulting in the reduction of vision impairment. A centralized data collection system will enable school personnel to access vision screening information about students. The centralized data collection system will also be used to monitor the completion and accomplishment of statutory requirements as well as to provide data for continued communication with policymakers on future needs for vision screening in Iowa. This coordinated child vision screening program, in collaboration with stakeholders across the state, will educate parents and schools about the importance of screening, provide opportunities to screen, refer children identified as having vision impairments, and collect and analyze data to promote improvements in policy for the benefit of all children in Iowa.

Any interested person may make written comments or suggestions on the proposed rules on or before February 10, 2015. Such written comments should be directed to Melissa Ellis, Department of Public Health, Lucas State Office Building, 321 E. 12th Street, Des Moines, Iowa 50319. Comments may be sent by fax to (515)242-6013 or by e-mail to melissa.ellis@idph.iowa.gov.

Also, a public hearing will be held on Tuesday, February 10, 2015, from 11 a.m. to 12:30 p.m. on GoToMeeting. Interested persons may join the meeting by computer by accessing the following Web site: <https://www1.gotomeeting.com/join/735837521>. The use of a microphone and speakers (VoIP) or a headset is recommended. Interested persons may also join the meeting by telephone in the United States and Canada, toll-free, at 1-877-309-2070; the access code is 735-837-521, and an audio PIN will be shown after the person joins the meeting. The meeting ID is 116-092-152. Persons may present their views either orally or in writing. At the hearing, persons will be asked to give their names and addresses for the record and to confine their remarks to the subject of the rules.

Any persons who intend to attend the public hearing and have special requirements, such as those relating to hearing impairments, should contact the Department of Public Health and advise of specific needs.

After analysis and review of this rule making, no impact on jobs has been found.

These rules are intended to implement Iowa Code section 135.39D.

The following amendment is proposed.

Adopt the following **new** 641—Chapter 52:

CHAPTER 52
VISION SCREENING

641—52.1(135) Purpose. The purpose of the child vision screening program is to improve the eye health and vision of Iowa’s children. The child vision screening program establishes a comprehensive vision evaluation effort to facilitate early detection and referral for treatment of visual impairment in order to reduce vision impairment in children.

641—52.2(135) Definitions. For purposes of this chapter, the following definitions apply:

“*Advanced registered nurse practitioner*” or “*ARNP*” means a person licensed to practice under rule 655—7.1(152).

“*Child vision screening workgroup*” means a group of eye health professionals in the state of Iowa established by the director and comprised of representatives of leading vision organizations, licensed ophthalmologists and licensed optometrists.

“*Comprehensive eye examination*” means a clinical diagnostic assessment performed by an optometrist or ophthalmologist to assess a person’s level of vision and to detect any abnormality or diseases.

“*Department*” means the Iowa department of public health.

“*Elementary school*” means an Iowa public or accredited nonpublic school that a kindergarten or third grade student would attend.

“*Iowa KidSight*” means a joint project of the Lions Clubs of Iowa and the University of Iowa, Department of Ophthalmology and Visual Sciences, dedicated to enhancing the early detection and treatment of vision impairments in Iowa’s young children (target population six months of age through kindergarten age) through screening and public education.

“*IRIS*” means the immunization registry information system as established in 641—Chapter 7.

“*Online vision screening*” means a vision screening test administered from the Internet to a child to assess vision and includes vision test results and recommendations.

“*Ophthalmologist*” means a person licensed to practice medicine and surgery or osteopathic medicine and surgery pursuant to Iowa Code chapter 148 and board-certified in ophthalmology as a specialist in medical and surgical eye problems.

“*Optometrist*” means a person licensed to practice optometry pursuant to Iowa Code chapter 154.

“*Photoscreening*” means a method of vision screening employing an automated technique that uses the red reflex of the eye to screen for eye problems and produces immediate readable results and a timely report of the results thereafter.

“*Physician*” means a person licensed to practice medicine and surgery or osteopathic medicine and surgery pursuant to Iowa Code chapter 148.

“*Physician assistant*” means a person licensed to practice as a physician assistant pursuant to Iowa Code chapter 148C.

“*Potential vision impairment*” means that a child’s vision appears to be compromised and there is reason for the child to be seen by an ophthalmologist or optometrist.

“*Student vision card*” means a card distributed by the Iowa Optometric Association to all schools in Iowa pursuant to Iowa Code section 280.7A. The student vision card recommends children receive a complete eye health examination.

“*Vision screening*” means an eye testing program that is age and developmentally appropriate and that assesses visual acuity or other risk factors contributing to refractive errors and other conditions.

641—52.3(135) Persons included and persons excluded.

52.3(1) The parent or guardian of a child who is to be enrolled in a public or accredited nonpublic elementary school shall ensure the child is screened for vision impairment at least once before enrollment in kindergarten and again before enrollment in grade three. The child vision screening requirements specified in this chapter apply to all persons seeking first-time enrollment in kindergarten or third grade in a public or accredited nonpublic elementary school in Iowa.

52.3(2) The child vision screening requirement shall not apply if the child vision screening conflicts with a parent’s or guardian’s genuine and sincere religious belief.

52.3(3) A child shall not be prohibited from attending school based upon failure of a parent or guardian to ensure the child has received the vision screening required by these rules.

641—52.4(135) Child vision screening components. The requirement for a child vision screening may be satisfied by any of the following:

52.4(1) A vision screening or comprehensive eye examination by an ophthalmologist or optometrist.

52.4(2) A vision screening conducted at a pediatrician's or family practice physician's office, a free clinic, a child care center, a local public health department, a public or accredited nonpublic school, or a community-based organization or by an advanced registered nurse practitioner or physician assistant.

52.4(3) All vision screening methods, including emerging vision screening technologies, shall be age-appropriate and shall be approved by the department. A list of acceptable child vision screening tests will be reviewed and updated annually by the department in consultation with the child vision screening workgroup and will be listed on the department's Web site. These tests may include but are not limited to photoscreening and online vision screening.

641—52.5(135) Time line for valid vision screening.

52.5(1) Kindergarten. To be valid, a minimum of one child vision screening shall be performed on a child no earlier than one year prior to the date of the child's enrollment in kindergarten and no later than six months after the date of the child's enrollment in kindergarten.

52.5(2) Grade three. To be valid, a minimum of one child vision screening shall be performed on a child no earlier than one year prior to the date of the child's enrollment in the third grade and no later than six months after the date of the child's enrollment in the third grade.

52.5(3) Substantial compliance. A child vision screening may also be deemed valid by the department if the department determines the child has substantially complied with the child vision screening requirements.

641—52.6(135) Proof of child vision screening.

52.6(1) The parent or guardian of a child enrolled in kindergarten or third grade shall ensure that evidence of a child vision screening is submitted to the school district or accredited nonpublic elementary school in which the child is enrolled either electronically through IRIS pursuant to subrule 52.6(2) or in hard copy or electronic form pursuant to subrule 52.6(3).

52.6(2) If the child's vision screening results were electronically submitted to IRIS, the parent or guardian may notify the school district or accredited nonpublic elementary school of such submission to satisfy the requirement for evidence of a child vision screening.

52.6(3) If evidence of the child vision screening is not electronically submitted to IRIS, the parent or guardian shall provide evidence of the child vision screening in hard copy or electronic form directly to the school. Hard copy or electronic evidence of the vision screening shall include the child's first name, last name, date of birth and ZIP code; evidence of the vision screening including the date of screening, left eye results, right eye results, vision screening result of "pass" or "fail," and designation of "yes" or "no" for referral made; and the name of the provider who performed the vision screening. A parent or guardian may submit a completed student vision card to satisfy this requirement.

52.6(4) Submission of a faxed copy, photocopy, or electronic copy of the child vision screening results is acceptable.

641—52.7(135) Child vision screening reporting.

52.7(1) A person authorized to perform a child vision screening required by this chapter shall report results of the child vision screening to the department.

a. An ophthalmologist or optometrist shall report the hard-copy results to the parent or guardian to be forwarded to the department via the school or shall report the results via IRIS if available.

b. A pediatrician's or family practice physician's office, a free clinic, a child care center, a local public health department, a public or accredited nonpublic school, or a community-based organization or an ARNP or physician assistant shall report the hard-copy results to the parent or guardian to be forwarded to the department via the school or shall report the results via IRIS if available.

c. Results from an online vision screening administered from the Internet, shall be generated to report hard-copy results to the parent or guardian to be forwarded to the department via the school or shall report the results via IRIS if available.

d. The results of photoscreening vision screening, including those performed by Iowa KidSight, shall be reported by hard copy to the parent or guardian to be forwarded to the department via the school or shall be reported via IRIS if available.

52.7(2) The department will collect and maintain results of the vision screenings submitted in hard copy or through IRIS.

641—52.8(135) School requirements.

52.8(1) Each public and accredited nonpublic elementary school, in collaboration with the department, shall provide the parents or guardians of students enrolled in the school with vision screening referral resources prior to enrollment or during the enrollment period.

52.8(2) Each public and accredited nonpublic elementary school shall provide to parents or guardians of students for whom evidence of a child vision screening is not submitted community eye health referral resources, including contact information for the local public health department, maternal and child health agency, Iowa KidSight, the department, or an optometric or ophthalmology society.

52.8(3) Each public and accredited nonpublic elementary school shall arrange for the following to be forwarded to the department:

- a.* Evidence of child vision screening results provided by parents or guardians;
- b.* A list of students whose parents or guardians indicate that the students' results were reported through IRIS;
- c.* All student vision cards provided to the school; and
- d.* Any other evidence of vision screening provided to the school.

641—52.9(135) Iowa's child vision screening database module and follow-up. The department may develop and maintain a statewide child vision screening database module in IRIS to collect and maintain child vision screening results, to ensure students receive the required vision screening, and to monitor eye health.

52.9(1) The database module shall consist of vision screening information, including identifying and demographic data.

52.9(2) Database module reporting shall comply with rule 641—52.7(135).

52.9(3) Restricted uses of database module. The database module information shall not be used to:

- a.* Market services to students or nonstudents,
- b.* Assist in bill collection services, or
- c.* Locate or identify students or nonstudents for any purpose other than those expressly provided in this rule.

52.9(4) Confidentiality of database module information. Child vision screening information, including identifying and demographic data maintained in the database module, is confidential and may not be disclosed except under the following limited circumstances:

- a.* The department may release information from the database module to the following:
 - (1) The person who received the child vision screening or the parent or guardian of the person who received the child vision screening;
 - (2) Users of the database module that complete an agreement with the department that specifies the conditions under which the database module can be accessed and that have been issued an organization code and username by the department;
 - (3) Persons or entities requesting child vision screening data in an aggregate form that does not identify an individual either directly or indirectly;
 - (4) Agencies that complete an agreement with the department which specifies conditions for access to database module information and how that information will be used;
 - (5) A representative of a state or federal agency, or an entity bound by that state or federal agency, to the extent the information is necessary to perform a legally authorized function of the agency or the department. The state or federal agency is subject to confidentiality regulations that are the same as or more stringent than those in the state of Iowa; or

(6) Licensed health care providers, agencies, and other persons involved with vision screenings, eye examinations, follow-up services, and intervention services as necessary to administer this chapter.

b. Approved database module users shall not release child vision screening data except to the person who received the child vision screening; the parent or guardian of the person who received the child vision screening; health records staff of schools; medical, optometry, ophthalmology or health care providers providing continuity of care; and other approved users of the database module.

641—52.10(135) Referral requirements.

52.10(1) If a vision screening identifies a potential vision impairment in a child, the person who performed the vision screening shall, if the person is not an ophthalmologist or optometrist, refer the child to an ophthalmologist or optometrist for a comprehensive eye examination.

52.10(2) Persons performing vision screenings shall contact parents or guardians of children identified as having potential vision impairment based on the results of a vision screening required pursuant to this chapter or a comprehensive eye examination required pursuant to subrule 52.10(1) in order to provide information on obtaining necessary vision correction.

These rules are intended to implement Iowa Code section 135.39D.