



## NORTH DAKOTA Optometric Association

### APPROPRIATIONS – HUMAN RESOURCES DIVISION

Tuesday, January 26, 2021 – 2:30 PM (Committee Work)

#### MEDICAID EXPANSION

Good morning Chairman Nelson and members of the Committee.

For the record, my name is Nancy Kopp. I serve as the Executive Director and registered lobbyist for the North Dakota Optometric Association.

Thank you for this opportunity for me to submit written testimony on behalf of the North Dakota Optometric Association, the primary eye and vision care providers in North Dakota, regarding the absence of adult vision services, as a benefit in the North Dakota Medicaid Expansion Program, currently administered by Sanford Health (MCO), as well would support the removal of the 2-year sunset clause.

The North Dakota Medicaid Expansion Program, as you know, is available to individuals between 19 and 65, with household incomes up to 138% of the Federal poverty level, or \$17,609.00 for 1 person. The Medicaid Expansion Program benefits in North Dakota do not mirror the benefits of our Traditional Medicaid Program, specifically for vision examination and eyewear for our low income underserved working adults, in comparison to the majority of states that did expand their Medicaid Program, to include adult vision benefits.

The impact of the exclusion of adult vision benefits for those that are eligible for Medicaid Expansion in North Dakota, had placed a burden on our charitable program, which you may be familiar with: Vision USA-North Dakota Project. Most if not all applications the Optometric Foundation of North Dakota received in 2015-2018, the applicant had health care benefits, but not vision. Our charitable program, in conjunction with the North Dakota Lions Clubs donations, simply found it difficult to sustain the provision and access to vision services, to the increased population of low income, underserved adults for essential vision needs, of potentially 18,000-20,000 adults. The Optometric Foundation of North Dakota made the difficult decision to suspend their charitable vision care program in November 2018. Our charitable program for the past 30 plus number of years, had provided eye care and eye wear for, primarily working adults, at no cost, to those that qualify. The participating optometrists, donated the eye examination and frame. The Lions Clubs' donations, along with discounts from participating labs and the Optometric Foundation of North Dakota, contributed to the cost of the eyeglass lenses.

In order to capture some of the state's cost impact, we hope that you undoubtedly will want to consider, the NDOA offers the following:

- It is our understanding that there presently are approximately 66,000 individuals on Traditional Medicaid, who are eligible for an eye examination; every year for children and every other year for adults. In addition, the Traditional Medicaid population has every year or every other year vision benefit of eyeglasses.
- The approximate number of Traditional Medicaid recipients that utilized vision exams and materials in the past had been approximately 19,000 of 66,000. That would equate to 28% utilization. North Dakota's investment, based on utilization, as you can see, would be minimal.

If the Committee drafts a bill to direct the administration of the Medicaid Expansion Program, some consideration to include vision services may be:

- The Department is accustomed to providing vision examination and materials based on a reimbursement fee schedule. The fee schedule, while not usual and customary fees, appears to be satisfactory to the credentialed optometrists and ophthalmologists on the provider panel. Incidentally, the vast majority of licensees in North Dakota do participate and provide eye and vision services to the underserved population, despite high no show rates and recent MMIS implementation issues.
- If the Legislature decides to continue the MCO administration of the Medicaid Expansion Program with Sanford Health, or any other MCO, at the very least, the NDOA would request consideration of integrating an annual or bi-annual adult eye examination into all health policies issued. That cost has been estimated to be minimal per member, per month, according to a study of the Insurance Commission in Washington State, based on the Uniform Medical Plan vision benefit for public employees. We have not acquired an actuarial cost from Sanford Health or other insurers. The materials costs of course, if prescribed, would require additional consideration and coordination of a benefit structure and cost analysis.

In summary, we have a minimal percentage of North Dakotans that are uninsured for their health care and are trying to make ends meet, but do not have the resources to meet their essential healthcare needs, namely vision and eye care, to maintain gainful employment, academic success, or even secure a valid driver's license.

The NDOA would respect and appreciate serious consideration of including a vision benefit in the existing or re-authorized North Dakota Medicaid Expansion Program that is as inclusive as other states.

Respectfully,  
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