Fiscal impact reports (FIRs) are prepared by the Legislative Finance Committee (LFC) for standing finance committees of the Legislature. LFC does not assume responsibility for the accuracy of these reports if they are used for other purposes.

FISCAL IMPACT REPORT

			LAST UPDATED	
SPONSOR	Soules	5	ORIGINAL DATE	2/16/25
			BILL	
SHORT TITLE		K-4 Vision and Hearing Screening	NUMBER	Senate Bill 344

ANALYST Liu

APPROPRIATION*

(dollars in thousands)

FY25	FY26	Recurring or Nonrecurring	Fund Affected
	\$2,000.0	Recurring	General Fund

Parentheses () indicate expenditure decreases.

*Amounts reflect most recent analysis of this legislation.

Relates to Senate Bill 38

Sources of Information

LFC Files American Academy of Pediatrics (AAP) American Academy of Audiology (AAA)

<u>Agency Analysis Received From</u> Early Childhood Education and Care Department (ECECD) Regional Education Cooperatives (REC) New Mexico School for the Blind and Visually Impaired (NMSBVI)

Agency Analysis was Solicited but Not Received From Public Education Department (PED)

SUMMARY

Synopsis of Senate Bill 344

Senate Bill 344 (SB344) appropriates \$2 million from the general fund to the Public Education Department (PED) for the purpose of providing vision and hearing screening for kindergarten through fourth grade students.

This bill does not contain an effective date and, as a result, would go into effect 90 days after the Legislature adjourns if enacted, or June 20, 2025.

FISCAL IMPLICATIONS

The appropriation of \$2 million contained in this bill is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of FY26 shall revert to the general fund. Although the bill does not specify future appropriations, establishing a new grant program could create an expectation the program will continue in future fiscal years; therefore, this cost is assumed to be recurring.

Current state law (Section 22-13-30 NMSA 1978) requires a school nurse, primary care health provider, or a lay eye screener to administer a vision screening test for students enrolled in prekindergarten, kindergarten, first grade, and third grade, and for transfer students in those grades. Provisions of this bill would likely duplicate current required school screenings except for vision screenings for second grade and hearing screenings for kindergarten through fourth grade (K-4). Additionally, vision and hearing screenings are covered under the early and periodic screening, diagnostic, and treatment (EPSDT) program for Medicaid-eligible recipients under the age of 21.

SIGNIFICANT ISSUES

Research suggests about a quarter of school-aged children have a significant vision problem and two to three out of every 1,000 children are born with hearing impairments, which can range from mild to profound. Many children develop hearing problems after birth. The American Academy of Audiology (AAA) endorses detection of hearing loss in early childhood and school-aged populations using evidence-based hearing screening methods. AAA's clinical practice guidelines for childhood hearing screening recommends:

- Pure tone screening for populations age 3 (chronologically and developmentally) and older,
- Using tympanometry in conjunction with pure tone screening in young child populations (i.e., preschool, kindergarten, grade 1),
- Screening for high frequency hearing loss where efforts to provide education on hearing loss prevention exist, and
- Screening at minimum in the following grades: preschool, kindergarten, and grades one, three, and five and either seven or nine.

No national guideline exists mandating ages at which vision screening should occur at school. The American Academy of Pediatrics has a periodicity schedule recommending ages at which vision screening should occur during well-child visits in the medical home. School nurses can use the periodicity schedule as a guide for determining when to screen at school for students ages 3 through 15 years.

PERFORMANCE IMPLICATIONS

Additional screenings for vision and hearing impairments may provide earlier interventions for students needing specific accommodations or other supports, such as eyeglasses and hearing aids. Students with adequate supports will be less likely to struggle academically in school, which may improve their achievement.

ADMINISTRATIVE IMPLICATIONS

Provisions of the bill will require PED to create a new grant process and determine awards for districts and charters that participate in the program. For new initiatives, PED staff have a short timeline after legislative sessions to create grant program requirements, ready application documents, and eventually review applications and make awards. Simultaneously, school districts and charter schools must decide whether they have the capacity or interest to apply for and implement new program funding as part of the annual budget submission to the department. Most initiatives are funded on a reimbursement basis, requiring schools to float expenses with existing operational revenue. Delays in the reimbursement process often incentivize larger cash reserves and rushed spending practices.

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

This bill relates to Senate Bill 38, which establishes an office of special education at PED responsible for monitoring school screening policies and practices.

SL/sgs/hg/sgs