



Opinion: The problem is clear: Medi-Cal is failing to protect children's eyesight

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In a California classroom today, a teacher is writing a math equation on a whiteboard. Later, he or she will display assignment instructions on a projection screen before asking students to read at their desks.

This is largely how learning works. An estimated [80% of what children learn](#) is presented visually. And there is a direct connection between vision health and school performance — a connection that [manifests by the time kids get to preschool](#).

Yet California has been backsliding in providing much-needed eye care to [more than half the state's children](#), who are served by [Medi-Cal, the state's version of Medicaid](#).

A recent report commissioned by the California Optometric Association finds just [16% of school-age children on Medi-Cal receive basic eye care](#) — which means 5 out of 6 are going without. In 47 of California's 58 counties, the percentage of children receiving vision care has fallen in the past seven years.

[More children](#) than ever are at risk of being left behind because of undetected and uncorrected vision deficiencies. For many, objects at a distance appear blurry, and children can't absorb what they cannot see. For others, it takes extra effort to maintain clear vision of a page in front of them, causing fatigue and discomfort.

Two factors drive this crisis. First, we are experiencing [an epidemic of myopia](#), or nearsightedness. Its prevalence has nearly doubled in the U.S. over the past 30 years. By 2050 it's projected to impact half the global population.

A 2018 study in Southern California [found 41.9% of youths](#), from 5 to 19, were myopic. Environmental factors are believed to be at play — an abundance of near-work activities, screen time at early ages and a paucity of time spent outdoors.

Second, and equally troubling, California is facing an access to vision care crisis. Medi-Cal's reimbursement rates are so low that providing care costs more than what providers are paid.

California's reimbursement for a new patient eye exam and refraction is just \$47 — third lowest in the nation and less than half the national Medicaid average. The rate hasn't increased in 25 years.

The effects are predictable: 10% of California optometrists have been forced out of the Medi-Cal program in the last two years, and 90% say patients report having difficulty finding a Medi-Cal provider.

While this means children who need glasses are not getting them, thus risking falling behind at school, the health implications are more pronounced.

Severe myopia increases the risk of serious eye disease; but myopia treated early can slow its progression. Also a comprehensive eye exam can detect indications of diabetes and other serious diseases, prompting referrals for treatment.

The recommended schedule for routine eye care for children is not extensive: once at 6 months old, at 3 years old, before entering first grade and then every year or two afterward.

These simple, relatively inexpensive interventions can yield lifelong benefits. Yet California has consistently undervalued this essential health care.

Clearly Medi-Cal is under growing pressure. At the national level, [cutbacks](#) enacted last year will [reduce Medicaid funding by \\$1 trillion](#) over the next decade and may result in about 12 million people losing health coverage.

That makes it even more important for Medi-Cal to remain an essential pillar of California's safety net.

But in the area of children's eye care, Medi-Cal is not doing its fundamental job; not when only 1 out of 6 eligible children receives a basic eye exam over a two-year period.

We must not let kids fall behind because of vision problems that can be readily and affordably identified and fixed.