



Prevent Blindness America Statement for Health Care Reform February 2009

Vision Care is Health Care

Good vision is an integral component to health and well-being, affects virtually all activities of daily living, and impacts individuals physically, emotionally, socially and financially. Loss of vision can have a devastating impact on individuals and their families. However, too many health plans, insurers, employers and policymakers exclude vision care – such as eye examinations, vision screenings, eyeglasses, low vision services, and other related benefits – from coverage.

Vision-related conditions affect people across the lifespan from childhood through elder years, and our health care delivery system must provide access to appropriate prevention and treatment services. Although nearly half of all blindness can be prevented through early detection and treatment, the number of Americans experiencing vision loss continues to increase. To that end, parity in vision care access and coverage is essential to ensuring that people living with eye disease, correctable/treatable vision loss, or undiagnosed eye conditions have access to much-needed diagnosis and treatment. Without such access, preventable vision-related conditions will go untreated, and costs will continue to rise. As such, all Americans should have coverage and access to comprehensive vision care – which is composed of the full-range of diagnostic, preventive, and treatment benefits and services, including regular eye examinations and vision screenings, necessary surgery, prescription therapies, corrective eye wear and low vision services.

Vision Problems are Health Care Problems

The Centers for Disease Control and Prevention (CDC) reports that “vision disability is one of the top ten disabilities among adults 18 years and older and the single most prevalent disabling condition among children.”¹ Currently, an estimated 3.6 million older Americans are blind or visually impaired.² According to the National Eye Institute (NEI) “the number of Americans with age-related eye disease and the vision impairment that results is expected to double within the next three decades.”³ Among Americans age 40 and older, the four most common eye diseases causing vision impairment and blindness are age-related macular degeneration (AMD), cataract, diabetic retinopathy, and glaucoma.⁴ Refractive errors are the most frequent vision problem in the United States – an estimated 150 million Americans use corrective eyewear to compensate for their refractive error.⁵ Uncorrected or under-corrected refractive error can result in significant vision impairment.⁶

Vision problems, in-and-of themselves, bring a host of challenges for the people they affect. Vision loss is associated with additional health challenges, including risk of falls in older Americans. According to the CDC, each year, nearly two million Americans over age 65 are injured in falls.⁷ Falls in older Americans

¹ “Improving the Nation’s Vision Health: A Coordinated Public Health Approach,” Centers for Disease Control, 2006.

² “Vision Problems in the U.S.: Prevalence of Adult Vision Impairment and Age-Related Eye Disease in America,” Prevent Blindness America and the National Eye Institute, 2008.

³ Ibid.

⁴ Ibid.

⁵ Ibid

⁶ Ibid.

⁷ “Once Just an Aging Sign, Falls Merit Complex Care,” New York Times, November 8, 2008; <http://www.nytimes.com/2008/11/08/us/08falls.html?pagewanted=1&r=1&ref=opinion>

typically result in hip fractures, which cost an estimated \$2.3 billion in annual medical expenses.⁸ “Health policymakers need to acknowledge that quality of life is an important patient outcome,” Don Curran, Chairman of the AMD Alliance International continues, “and recognizes the urgent need to provide timely access to physicians, treatments, and support services to limit the damage caused by AMD.”⁹

While the risk of eye disease increases after the age of 40, eye and vision problems in children are of equal concern, due to the fact that, if left untreated, they can lead to permanent and irreversible visual loss and/or cause problems socially, academically, and developmentally. Although more than 12.1 million school-age children have some form of a vision problem, only one-third of all children receive eye care services before the age of six.¹⁰ Approximately 80% of what a child learns is done so visually.¹¹ As such, good vision is essential for educational progress, proper physical development and athletic performance, and healthy self-esteem in growing children.

Fortunately, in children, many serious ocular conditions – such as amblyopia, nearsightedness, farsightedness, and astigmatism – are treatable if diagnosed at an early stage. The promotion of regular eye examinations and periodic vision screenings that span the school years can have a tremendous impact on ensuring early detection of vision problems and help children fulfill their academic potential. Yet, only an estimated 14% of children receive comprehensive eye examinations before entering kindergarten or first grade; less than 50% of children receive a vision screening in pediatric offices; and only 21% of preschool age children are screened for vision problems.¹²

Prevention of Eye Disease and Vision Loss: Saving Sight and Saving Money

The financial costs of vision impairment to our country’s fiscal health are staggering. Prevent Blindness America (PBA) estimates that the annual costs of adult vision problems in the U.S. are approximately \$51.4 billion.¹³ The annual cost of untreated amblyopia – reduced vision in an eye that has not received adequate use during early childhood – is approximately \$7.4 billion in lost productivity.¹⁴ NEI estimates that in 2003 the total direct and indirect costs of visual disorders and disabilities in the U.S. were approximately \$68 billion dollars, and with each passing year these costs continue to escalate.¹⁵

Regular preventive eye care can identify vision problems at the earliest and most treatable stage. While many eye diseases cannot be cured, proper diagnosis, management and treatment can slow the progression and reduce their adverse impacts on individuals, families and the nation. The key, therefore, to preventing and reducing vision loss and blindness – and the associated economic and social impacts on our nation – is early detection through eye examinations and vision screenings. This can only be done through increasing access to – and utilization of – comprehensive vision care.

Comprehensive vision care must include the full spectrum of vision care benefits and services, including comprehensive eye examinations and vision screenings – which are complementary components of vision

⁸ Letter to the Editor from Tara A. Cortes, President, Lighthouse International, New York Times, <http://www.nytimes.com/2008/11/17/opinion/lweb17vision.html>

⁹ Press release from Prevent Blindness America, “Age-Related Macular Degeneration can lead to Depression and Suicide,” September 20, 2006.

¹⁰ “Our Vision for Children’s Vision: A National Call to Action for the Advancement of Children’s Vision and Eye Health, Prevent Blindness America,” Prevent Blindness America, 2008.

¹¹ Ottar WL, Scott WK, Holgado SI. Photoscreening for amblyogenic factors. *J Pediatr Ophthalmol Strabismus*. 1995; 32:289-295.

¹² Ibid.

¹³ “The Economic Impact of Vision Problems,” Prevent Blindness America, 2007.

¹⁴ “Our Vision for Children’s Vision: A National Call to Action for the Advancement of Children’s Vision and Eye Health, Prevent Blindness America,” Prevent Blindness America, 2008.

¹⁵ Ellwein Leon. Updating the Hu 1981 Estimates of the Economic Costs of Visual Disorders and Disabilities.

care. Vision screenings do not replace comprehensive examinations performed by an eye care professional, but provide an important and cost-effective initial evaluation of vision and help identify those individuals who are in need of a comprehensive eye examination. To that end, vision screenings serve an initial and important public health referral role, particularly for those who may not otherwise seek an eye examination.¹⁶ If any potential problems are identified during a vision screening, a patient is referred for a comprehensive eye examination provided by an eye care professional. Together – vision screenings and comprehensive eye examinations – help ensure that individuals with vision problems receive the care they need to reduce and prevent vision loss.

The Partnership for Prevention (PFPP) has reported that increasing vision screenings for adults from the current rate of 50% to 90% would provide an additional 31,000 lifetime quality-adjusted life years.¹⁷ Moreover, PFPP found that vision screening for seniors saves money. In fact, vision screening for adults aged 65 and older ranks among the most highly cost-effective of evidence-based, clinical preventive services analyzed by the organization.¹⁸ Of note, the CDC lists “having yearly eye exams” for older Americans among its recommended fall prevention strategies.¹⁹ Prevention of vision loss in older Americans, in turn, can reduce the risk of falls and hip fractures and the associated economic and social costs.

As noted above, vision care for children is equally important as such services for adults. To that end, Healthy People 2010 – the nation’s framework for prevention – includes a series of Objectives related to children’s vision health and well-being. Further, the U.S. Preventive Services Task Force (USPSTF) recommends screening to detect amblyopia, strabismus, and defects in visual acuity in children younger than five years of age. The USPSTF found that pediatric vision screening is inexpensive, and follow-up treatment is effective and improves quality of life.²⁰

Vision care services consistently have been found to help prevent blindness, reduce vision loss, improve quality of life and well-being, increase productivity, and reduce costs and burdens on the nation’s health care system. Therefore, increasing access to vision care services is essential, as we seek to reform the nation’s health care system. Specifically, to help prevent disease, promote health, and achieve the associated cost savings, vision care must be better incorporated into the provision, structure and reimbursement of health care for Americans of all ages.

A National Agenda for Promoting Eye Health and Preventing Eye Disease and Vision Loss

The 111th Congress and the Obama Administration have an unprecedented opportunity to take action to ensure that we – as a nation – take all steps possible to promote good eye health and prevent vision loss. We can no longer afford to maintain a health care system which focuses on providing care to those who are sick; rather, we must address the leading causes of health care costs by promoting prevention and management of chronic diseases and identifying vision problems at the earliest stage possible. Vision screenings and examinations not only identify eye and vision-related disorders, but also provide important insight into overall health and wellness, due to connections between eye health and other chronic disease states and health-related conditions, such as diabetes. Vision care is indeed health care.

¹⁶ Ibid.

¹⁷ “Which Preventive Services Would Provide the Most Health Benefits if Utilization Rates Improves?” Partnership for Prevention, <http://www.prevent.org/content/view/88>, retrieved December 13, 2008.

¹⁸ Ibid.

¹⁹ Hip Fractures Among Older Americans, Centers for Disease Control and Prevention, <http://www.cdc.gov/ncipc/factsheets/adulthipfx.htm>

²⁰ “Our Vision for Children’s Vision: A National Call to Action for the Advancement of Children’s Vision and Eye Health, Prevent Blindness America,” Prevent Blindness America, 2008.

While the risk and incidence of vision loss and eye disease increase with age, all Americans – across their life spans – must have access to comprehensive vision care to ensure that vision problems, whenever they may arise, are detected and addressed at the earliest possible stage. Ensuring access to appropriate quality, comprehensive vision care will help prevent blindness and preserve sight.

To that end, Prevent Blindness America (PBA) calls upon the 111th Congress and the Obama Administration to ensure all Americans have coverage for – and access to – comprehensive vision care – which is composed of the full-range of diagnostic, preventative, and treatment benefits and services, including regular eye examinations and vision screenings, necessary surgery, prescription therapies, corrective eye wear, and low vision services. Vision care parity with other health care benefits and services is essential to ensuring individuals covered in the group and individual private insurance market and those under public plans at the federal, state, and local level receive vision care and services that will improve health and preserve sight.

Specifically, Prevent Blindness America urges Members of Congress and the Obama Administration to:

- Include comprehensive vision care in any minimum benefits package or required services provided for in national health reform legislation.
- Incorporate comprehensive vision care into all federally funded health plans and programs.
- Ensure co-payments and deductibles for vision care under public and private health plans are the same as for other health care benefits and services.
- Provide additional resources to the Medicaid program to ensure that states can preserve and/or extend coverage for – and access to – vision care for individuals covered under Medicaid and/or the State Children’s Health Insurance Programs (SCHIP) that are blended with state Medicaid programs.
- Extend the Medicaid model of vision care under the Early and Periodic, Screening, Diagnosis and Treatment (EPSDT) provision to SCHIP.
- Strengthen the meaningfulness of the Welcome to Medicare benefit by: (1) incorporating the currently recommended visual acuity test into the review of functional ability and level of safety components of the initial preventive physical examination (IPPE), and (2) providing covered referral to an eye care professional for examination of any suspected vision problems identified during the IPPE vision acuity test, not just those concerns related to diabetic retinopathy or glaucoma.
- Expand Medicare coverage for eye examinations, glaucoma tests, eyeglasses and contact lenses to all beneficiaries, as the risk for glaucoma, AMD, and other eye diseases and vision problems greatly increases with age.
- Encourage individuals to utilize vision care services by making such benefits affordable (e.g., low or no deductibles or co-payments) and accessible (e.g., addressing disparities in access to care in underserved communities).
- Provide economic incentives for private-sector employers to provide vision care benefits to their employees.
- Create incentives for vision screening and eye health services to be incorporated into chronic disease management and prevention efforts (e.g., health professionals providing care and services to individuals

with diabetes should be educating and informing patients of their risk for cataract and diabetic retinopathy).

For fiscal year (FY) 2010, Prevent Blindness America also respectfully urges Congress and the Obama Administration to:

- Support the implementation of the findings of the CDC’s report, “Improving the Nation’s Vision Health: A Coordinated Public Health Approach.” This includes support for increased public and health professional awareness of eye disease and vision loss, implementation of vision loss prevention interventions with a focus on addressing health care disparities, and targeting of individuals most at-risk for vision loss and the health professionals most likely to encounter them. Specifically, PBA advocates that the CDC receive:
 - \$4.5 million to sustain and expand its efforts to address the growing public health threat of preventable vision loss among older Americans, low-income, and underserved populations.
 - Increased funding to support eye disease surveillance and evaluation systems, so our nation has much-needed epidemiological data regarding overall burden and high-risk populations, to support formulation and evaluation of strategies to prevent and reduce the economic and social costs associated with vision loss and eye diseases.
- Provide \$10 billion to the National Institutes of Health (NIH), with \$711 million for the NEI, to bolster efforts to identify the underlying causes of eye disease and vision loss, improve early detection and diagnosis of eye disease and vision loss, and advance prevention and treatment efforts.
- Maintain “Peer Reviewed Vision Research” as a dedicated line item within the Congressionally Directed Medical Research Program (CDMRP) and increase its funding to \$10 million.
- Designate \$6.5 million for the Fund the Military Vision Center of Excellence and Eye Trauma Injury Registry.
- Support efforts of the Maternal and Child Health (MCH) Bureau, within the Health Resources and Services Administration, to develop and implement a nation-wide core vision-related reporting item for a state Title V core performance measure related to vision screening
- Support initiatives within the Head Start program to ensure that all Head Start enrollees receive a vision screening and that such screenings are provided in a manner that promotes consistency and quality in protocol and administration.
- Support the enactment of the Vision Care for Kids Act of 2009 – bipartisan legislation that will help ensure children have much-needed access to vision care.
- Incorporate vision screening into the school-readiness initiatives under No Child Left Behind.
- Expand and enhance Department of Health and Human Services efforts to eliminate vision-related health disparities, with a focus on at-risk populations. Critical to this effort is improved access to care, strengthened health delivery systems, enhanced partnerships with existing organizations and innovative partnership expansion, all of which builds leadership potential to effect change.