

2005 White House Conference on Aging Vision Health Platform

CAN YOU SEE THIS?

**HELP TO KEEP IT THAT WAY
FOR ALL OLDER AMERICANS!**

SUPPORT RESOLUTIONS:

13, 21, 31, 33, 34, 37, 40, 41, 43, 46, 49, 53, 70



STATEMENT OF THE PROBLEM

Age-related Vision Impairment/Eye Disease is a Major Public Health Problem with Increasing Healthcare and Societal Cost Implications for the Nation.

The National Eye Institute (NEI) estimates that more than 38 million Americans age 40 and older experience blindness, low vision or an age-related eye disease, such as age-related macular degeneration, diabetic retinopathy, glaucoma or cataracts. The economic and societal impact of eye disease is increasing due not only to the aging of the population, but to its disproportionate incidence in minority populations and as a co-morbid condition of other chronic diseases.

Although the NEI estimates that the current annual cost of vision impairment and eye disease to the United States is \$68 billion, this number does not fully quantify the impact of direct healthcare costs, lost productivity, reduced independence, diminished quality of life, increased depression and accelerated mortality. The continuum of vision loss presents a major public health problem and financial challenge to both the private and public sectors.

In public opinion polls over the past 40 years, Americans have consistently identified fear of vision loss as second only to fear of cancer. As a result, the community of support for our nation's vision health, including eye care professionals, vision researchers, patient advocacy groups, aging and minority health advocates and industry propose to strengthen and stimulate a national focus for reducing and controlling vision problems and their associated disabilities in older Americans.

Three major priority areas — prevention and early detection, access to treatment and rehabilitation, and research — are proposed to strengthen and stimulate a national focus for reducing and controlling vision problems and their associated disabilities in older Americans. In the spirit of NEI's **Healthy People 2010** Vision Objectives, each priority area has key objectives that we must meet as a nation.

I. PREVENTION AND EARLY DETECTION

To stimulate and strengthen a national coordinated effort for reducing the occurrence of vision loss and its accompanying disabilities in older Americans, the nation must have a full-scale public health effort, including:

- Increased funding for the National Eye Health Education Program (NEHEP) at the NEI to ensure sufficient resources needed to carry out communication and education campaigns;
- Increased funding for the Centers for Disease Control and Prevention (CDC) to build a national vision program, including surveillance and translational research, to improve prevention and early detection of the major blinding eye diseases in partnership with key public health partners.

II. ACCESS TO TREATMENT AND REHABILITATION

To ensure access to and availability of treatment and vision rehabilitation services for older Americans, we must:

- Support funding for the Centers for Medicare and Medicaid Services (CMS) for initiatives such as the Diabetes Quality Improvement Program (DQIP) that promote access to diabetic eye exams and vision rehabilitation services;
- Provide adequate reimbursement under Medicare and Medicaid for vision health and rehabilitation specialists to ensure appropriate access to vision care throughout the country;
- Support Medicare and Medicaid coverage for health information technologies to ensure access to the highest quality care.

III. RESEARCH

To ensure the highest quality of laboratory and clinical research aimed at increasing our understanding of the eye and visual system in health and disease, develop effective treatments, determine the most appropriate means of prevention and develop adaptive processes that most efficiently facilitate vision rehabilitation, we must:

- Support full funding of NEI's critical priorities in eye and vision research for preventing and treating sight threatening diseases and disorders, as identified by the National Advisory Eye Council in cooperation with the eye and vision community;
- Support full funding of the National Institutes of Health (NIH) to ensure that NEI's collaborative research with other NIH Institutes/Centers, such as the Institute on Aging and the National Center for Minority Health and Health Disparities, results in more comprehensive characterization of age-related eye diseases as well as laboratory and clinical findings that can result in new treatments and therapies;
- Intensify efforts at the NIH, the Agency for Healthcare Research and Quality, and the Health Resources and Services Administration to train and retain physicians and vision healthcare providers in clinical research until the decline in the numbers has been reversed and the clinical research workforce specifically includes substantially more ophthalmologists, optometrists, vision health scientists and healthcare doctorates than is now the case.



NATIONAL
ALLIANCE
for EYE and
VISION
RESEARCH