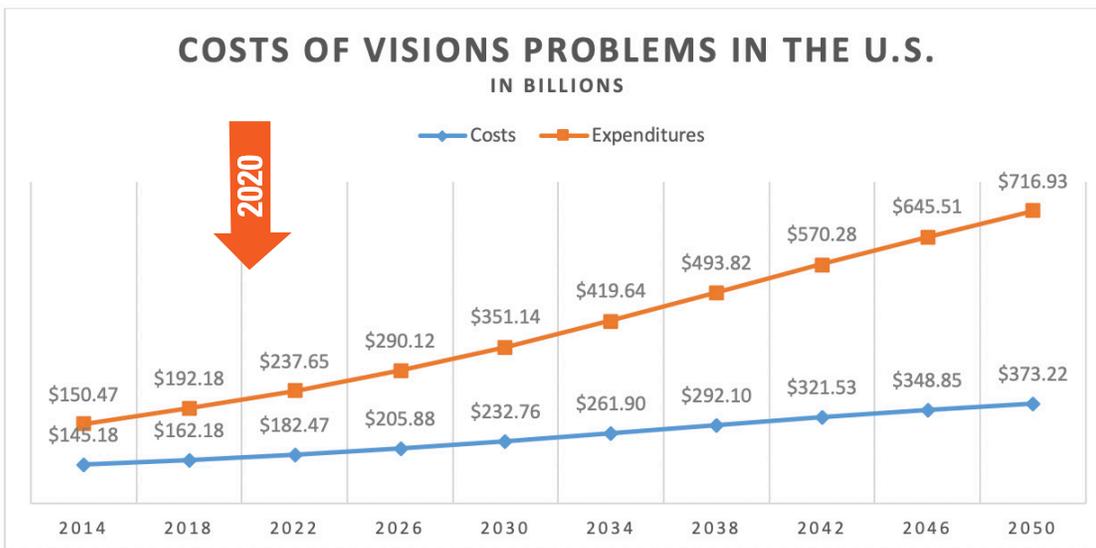


The national cost of vision problems, including private and public payments for medical care, long-term care, patients' out-of-pocket costs, direct and indirect costs, and lost productivity and consequential lost tax revenue amounted to **\$167 billion in 2019**, and is expected to increase to \$274 billion by 2032 just as the baby boomer generation is projected to become Medicare-eligible. **According to national forecasts, expenditures on vision problems, due to an aging population and changes in demographics, will reach \$385 billion by 2032 and \$717 billion by 2050. The proportion of these costs paid by government programs will increase from 32.6% to 41.14% by 2050.** With an aging population and a working adult population who faces a rise in chronic diseases that affect their vision and ability to maintain their own economic independence through sustained employment, **now is the time to invest in our collective eye health.**

Vision impairment and eye disease often contributes to several costly and chronic conditions, including: **diabetes, injuries and death related to falling, stroke, depression and social isolation, cognitive decline, lack of mobility, and need for long-term care.** Vision problems are exacerbated by, barriers in access to care resulting from high costs, lack of transportation, inability to prioritize eye care with other conditions, and poor health outcomes. Patients with vision loss experienced longer hospital stays and high readmission rates, resulting in \$500 million in excess costs.<sup>4</sup>



**EXPENDITURES ON VISION PROBLEMS WILL REACH \$717 BILION BY 2050.**

Reference: "The Future of Vision: Forecasting the Prevalence and Costs of Vision Problems." NORC University of Chicago (2014)

## Projected Costs to the Federal Government

**\$47.4 billion (32.6%)**



**2014**

**\$154.3 billion (41.4%)**



**2050**

Government payments include medical costs and long-term care costs paid by federal and state insurance programs, government assistance programs, entitlement programs and tax revenue losses.

<sup>4</sup> Morse AR, et al. JAMA Ophthalmol. 2019;doi:10.1001/jamaophthalmol.2019.0446. Accessed 20/01/23 from: <https://www.ncbi.nlm.nih.gov/pubmed/30946451>

\* Photo Credit: Bureau of Labor Statistics: <https://www.bls.gov/opub/mlr/2018/article/program-participation-and-spending-patterns-of-families-receiv-ing-means-tested-assistance.htm>