

February 28, 2018

The Honorable Kevin Brady
Chairman, Committee on Ways and Means
United States House of Representatives
Washington, DC 20510

The Honorable Richard Neal
Ranking Member, Committee on Ways and Means
United States House of Representatives
Washington, DC 20510

Dear Chairman Brady and Ranking Member Neal:

Prevent Blindness is the nation's leading nonprofit, voluntary organization committed to preventing blindness and preserving sight. Prevent Blindness represents millions of people of all ages across the country who live with low vision and vision-related eye diseases. We appreciate the opportunity to submit a Statement for the Record in response to the United States House of Representatives Committee on Ways and Means' February 14, 2018 hearing with United States Secretary of Health and Human Services (HHS) Alex Azar to consider the Fiscal Year 2019 HHS Budget Request. Specifically, we would like to outline to the Committee our concerns for the future of our nation's vision and eye health and ask for your support in developing policies that improve patient access to cost-effective, preventive care.

Our Nation's Vision and Eye Health

Eyesight is highly valued: it is central to an adult's employability, a child's success in school, and sustaining our independence as we age. **A recently released Robert Wood Johnson Foundation study ranks eye disorders as the 5th leading chronic condition among those aged 65 years and up and 7th across all age groups.** People with vision impairment are more likely to experience other chronic conditions, including diabetes, hearing impairment, heart problems, hypertension, joint symptoms, low back pain, and stroke as well as falls, injury, motor vehicle collisions, depression, social isolation, diminished health-related quality of life, and premature death. The financial impact of these problems is enormous, costing our country \$145 billion in health care costs and lost productivity.

In our nation's children, vision impairments caused by refractive error, amblyopia, strabismus, and/or astigmatism are common conditions, affecting 5 to 10 percent of all preschoolers and nearly 1 in 4 school-aged children. If not detected and treated early, vision impairment could affect all aspects of life, negatively impacting a child's cognitive, motor, and social development, ability to learn, athletic performance, and self-esteem. Vision problems in children bring with them a tremendous long-term cost to our economy. Annually, the economic burden of eye conditions among the U.S. population younger than age 18 is \$6.1 billion, and untreated amblyopia alone costs the U.S. nearly \$7.4 billion in earning power.

Due to an aging population and shifting demographics, without significant planning and intervention, costs could rise to as much as \$717 billion by the year 2050. We encourage the Committee's support of resources for existing adult vision programs at the Centers for Disease Control and Prevention (CDC), advanced eye health research at the National Eye Institute (NEI) with the National Institutes of Health (NIH), and specific pediatric eye health needs addressed through Maternal and Child Health Bureau at the Health Resources and Services Administration (HRSA) grants. It is imperative that we address the incoming tide of vision problems facing our nation.

NASEM Recommendations for Vision in Public Health

In September 2016, the National Academies of Sciences, Engineering, and Medicine (NASEM, formerly the Institutes of Medicine) issued a report, [*Making Eye Health a Population Imperative: Vision for Tomorrow*](#) highlighting the significance of our nation's increasing vision impairment problem and making recommendations to address it. A coordinated approach to interventions that support key stakeholders and state-based public health systems is needed to expand early detection, prevention, patient support, and research to lessen the burden of vision disorders on working adults and our nation's public health infrastructure.

Specifically, the NASEM recommendations include:

1. Motivating nationwide action toward achieving a reduction in the burden of vision impairment across the United States
2. Coordinating a public awareness campaign to promote policies and practices that encourage lifelong eye and vision health, reduce vision impairment, and promote health equity.
3. Creating an interagency workgroup to develop grant programs that target the leading causes, consequences, and unmet needs of vision health and impairment.
4. Convening a panel to develop a single set of evidence-based clinical and rehabilitation practice guidelines and measures that can be used by eye care professionals, other care providers, and public health professionals to prevent, screen for, detect, monitor, diagnose, and treat eye and vision problems.
5. Developing a coordinated surveillance system for eye and vision health in the United States.
6. Building state and local public health capacity by prioritizing and expanding the CDC's vision grant program in partnership with state-based programs and stakeholders

The NASEM report also acknowledges the important—yet underfunded—roles of the Vision Health Initiative (VHI) at the CDC, the National Eye Institute (NEI) at the NIH, and the National Center for Children's Vision and Eye Health program through HRSA as leading examples of the importance of quality improvement in advancing population health. We believe the NASEM's framework for responding to our nation's vision health provides a realistic path forward, and we urge the Committee to consider Prevent Blindness's Fiscal Year 2019 requests for HRSA, CDC, and the NEI, outlined below.

Health Resources and Services Administration

Investing in programs that keep people healthy is important for the vitality of our nation. HRSA programs have been successful in improving the health of those at highest risk for poor health outcomes. The agency supports efforts that drive quality care, better leverage existing investments and achieve improved health outcomes at a lower cost. HRSA is well positioned to address these issues and to continue building on the agency's many successes, but a stronger commitment of resources is necessary to effectively do so.

- **Maternal and Child Health Bureau:** Specifically, we ask Congress to consider the unaddressed need for children's vision screenings as an essential part of a child's healthy development and support Prevent Blindness's request of **\$3.5 million** to establish a children's vision and eye health coordinating center at MCHB and to provide up to 10 grants to state departments of public health. This state-level grant funding will allow the MCHB to provide assistance to states developing children's eye health programs that promote early detection and follow-up to an eye care professional, as well as coordination of programmatic efforts for children's vision across federal agencies.

Centers for Disease Control and Prevention

Prevent Blindness supports a strong, robustly-funded CDC to respond to current and emerging public health programs that threaten Americans' way of life. In addition to safeguarding our nation's health, CDC is faced with unprecedented challenges and responsibilities ranging from the prevention of diabetes, heart disease, stroke, cancer, lung disease and other chronic diseases, reducing health disparities, and for needed public health research and health statistics.

- **Vision Health Initiative:** We ask the Committee to support Prevent Blindness' request for **\$3.3 million** to the VHI in FY 2019 to expand its role in addressing vision as a serious comorbidity, integrating vision interventions into current public health work, and addressing needed surveillance of eye diseases. The impact of the VHI's work can be felt at state and local levels as some of its main objectives include helping

states develop the capacity to implement effective state-based surveillance systems, facilitate partnerships to preserve, protect, and enhance vision health, deploying evidence-based and cost-effective public health interventions, increase access to needed eye care, and reduce health disparities among people with or at high risk for vision loss.

- **Glaucoma:** We ask the Committee to support Prevent Blindness's request for **\$3,300,000** to the Glaucoma Project with the National Center on Chronic Disease Prevention and Health Promotion at the CDC. Adequate FY 2019 resources will allow the program to continue to improve glaucoma screening, referral, and treatment and ultimately protect work readiness, positive productivity, and economic independence and security for Americans. The program is intended to reach those populations experiencing the greatest disparity in access to glaucoma care through an integrated collaboration among private and public organizations.
- **Prevention and Public Health Fund:** We have serious concern about the most recent continuing resolution, which cut \$750 million from the Prevention and Public Health Fund (Prevention Fund) and will put Americans at greater risk for illnesses, injuries and preventable deaths. These cuts represent a 17 percent cut to the Prevention Fund over several years, including an 11 percent cut in fiscal year (FY) 2019. We ask you to reject any additional cuts to the Prevention Fund and restore this lost funding to the CDC.

National Eye Institute at the National Institutes of Health

The National Eye Institute, which was created by Congress in 1968 and charged with protecting and prolonging the collective vision of the American people, is celebrating its 50th anniversary in 2018. This significant milestone could not have been achieved without the continued support of Congress and the recognition of the essential but often overlooked role that vision plays in Americans' physical and emotional health, employability, readiness to learn in school, childhood development, and sustaining our independence as we age.

As such, we ask Congress to provide the NEI with **\$800 million** for FY 2019 in order to bolster efforts to identify the underlying causes of eye disease and vision loss, improve early detection and diagnosis, and advance prevention and treatment efforts. At the current rate of funding, the U.S. is spending \$2.30 per person, per year on vision research while the cost of treating low vision or blindness is \$6,680 per person, per year. This funding request would restore the NEI's operating budget and ensure a pattern of sustained and predictable funding while restoring some of the NIH's 25% of purchasing power lost since 2003.

Advancing Health Reform

In the FY2019 HHS "Budget in Brief," Secretary Azar indicates his intention to implement reforms modeled similarly to the proposals set forth in the Graham-Cassidy-Heller-Johnson legislation considered by the United States Senate in the fall of 2017. Prevent Blindness has very serious concerns with the precedent that Secretary Azar's proposals establishes for patients seeking vision and eye healthcare services.

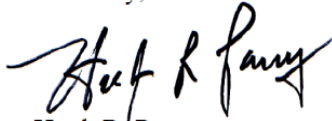
- **Impacts of a Block Grant Medicaid Program:** The proposals set forth to convert federal funding into a block grant program will force states to cut eligibility for vulnerable patients. In some states, Medicaid is often the only source of vision and eye care for many adults and children. Facing an uncertain and underfunded future of the Medicaid program, states will likely have no choice but to cut vision screenings and eye health services that can potentially curb the progression of and, in some cases, prevent altogether incidents of vision loss for children, aging Americans, and patients with chronic diseases.
- **Protections for Patients with Pre-Existing and Chronic Conditions:** As well, we remain alarmed that the proposals supported by the Administration do not go far enough to ensure, without question, that patients with a pre-existing condition will be able to acquire affordable insurance plans. Under such

financial constraints, patients will not be empowered to prioritize their vision and eye health and will likely forgo cost-effective, sight-saving preventive care.

- **Essential Health Benefits:** Early detection is oftentimes the key to preserving sight from such progressive diseases as glaucoma, cataracts, diabetic retinopathy, and macular degeneration. We are troubled that the Administration supports, as a manner of achieving cost-savings, removing a truly cost-effective approach to early detection and preventive services for both children and adults with chronic diseases for which vision loss is a serious complication. As we outline above, vision impairment is a true cost burden on our economy and our nation's health. We urge the Ways and Means Committee to ensure that Americans of all ages have access to basic, preventive measures that will help them avoid permanent vision loss.

As the House of Representatives Committee on Ways and Means begins to consider the budgetary proposals put forth by the Trump Administration for HHS in FY 2019, Prevent Blindness stands ready to assist the Committee as needed, and urge you to work in a bipartisan manner to confront our nation's healthcare challenges. If you should have any questions, please reach out to Sara D. Brown, Director of Government Affairs at (312) 363-6031 or sbrown@preventblindness.org.

Sincerely,



Hugh R. Parry

President and Chief Executive Officer