

February 24, 2020

The Honorable Roy Blunt
Chairman
United States Senate
Appropriations Subcommittee on Labor,
Health and Human Services, Education
and Related Agencies
Washington, DC 20510

The Honorable Patty Murray
Ranking Member
United States Senate
Appropriations Subcommittee on Labor,
Health and Human Services, Education
and Related Agencies
Washington, DC 20510

Dear Chairman Blunt and Ranking Member Murray:

As you develop the Senate's Labor, Health and Human Services, Education, and Related Agencies appropriations legislation for Fiscal Year (FY) 2021, we—the 83 undersigned organizations that represent patients and consumers, public health professionals, providers, and community service providers across the vision and eye health spectrum—urge you to provide **\$5 million to the Centers for Disease Control and Prevention (CDC)'s Vision and Eye Health program and \$4 million for Glaucoma**. This funding would allow the CDC to conduct long overdue and critically needed national surveillance of the most devastating eye diseases and conditions, determine where gaps in access to care exist, and enable states and communities to improve vision and eye health at the state, local, or systems level. The year 2020 represents an opportune time to highlight the role that vision and eye health has in daily living for people of all ages, racial and ethnic backgrounds, and socio-economic circumstances.

Vision impairments will cost the United States \$172 billion in 2020¹. **Absent investments in vision and eye health as a public health priority, these costs will increase to \$717 billion by 2050.** Vision impairments and eye disease often contribute to or are complicated by other serious and costly chronic health conditions, including diabetes, stroke, depression, social isolation, cognitive decline, and injuries related to falls. Lack of mobility, independence, access to care, and self-management of health conditions are all equally serious consequences of vision problems.

The CDC addresses our national vision impairment and eye disease burden by conducting public health surveillance, research, and evidence-based public health interventions designed to complement state and community health efforts. Data from the most reliable surveillance and epidemiological tool available—the National Health and Nutrition Examination Survey (NHANES)—is critical to the CDC. The data generated from this survey allows the CDC to track state-level data on vision loss and eye disease, evaluate variances across subgroups and demographics, and implement findings into evidence-based, strategic public health interventions to deploy at the state and community level.

However, due to a severe lack of resources allocated to the CDC's vision and eye health programs, **the CDC has not been able to utilize NHANES to collect reliable prevalence data of vision impairment and eye disease since 2008. This means that our best available data on our national vision loss and eye disease burden is over a decade old**. With a rapidly aging population and a working class that faces rising healthcare costs and chronic disease rates, the CDC needs current and accurate data to understand where gaps exist and how we can get ahead of these serious trends.

Additionally, \$4 million allocated to the CDC's glaucoma program in FY 2021 will allow efforts on glaucoma detection, referral, and sustained treatment to continue through cooperative and cost-effective

¹ ["The Future of Vision: Forecasting the Prevalence and Costs of Vision Problems:"](#) NORC University of Chicago (2014)

public-private partnerships and innovative outreach and service delivery projects that have successfully reached high-risk and underserved populations. Glaucoma is a leading cause of blindness for people aged 60 years and older. Today, our nation spends more than \$6 billion annually on the disease **with costs projected to rise to \$12 billion per year by 2032 at which time nearly 4.3 million people will face the disease**. In the early stages, glaucoma has no symptoms or noticeable vision loss; however, by the time symptoms or vision loss appears, permanent damage to the eye may have already occurred and vision lost cannot be restored. Public education, early detection, and treatment are cost-effective and fundamental approaches to slowing the progression of glaucoma and preserving remaining vision.

Our nation needs coordinated interventions that support key stakeholders and state-based public health systems to expand early detection, prevention, patient support, and research to lessen the burden of vision disorders on working adults and America's public health infrastructure. We urge the Senate to reinvest in the CDC's Vision and Eye Health program, and restore its work in surveillance and maintain the CDC's work in glaucoma so that Americans can look forward to a lifetime of healthy vision and eyesight. If you have any questions, please contact Sara Brown at sbrown@preventblindness.org.

Sincerely,

Prevent Blindness

Alliance for Aging Research

American Academy of Ophthalmology

American Association for Pediatric Ophthalmology and Strabismus

American Association of Service Coordinators

American Council of the Blind

American Macular Degeneration Foundation (AMDF)

Association for Research in Vision and Ophthalmology (ARVO)

Association of Diabetes Care & Education Specialists

Association of Schools and Colleges of Optometry (ASCO)

Association of University Professors of Ophthalmology

American Glaucoma Society

Beacon Lighthouse Inc

Bascom Palmer Eye Institute

Beyond Vision (legal entities: Wiscraft Inc., and Associated Industries for the Blind)

BrightFocus Foundation

Chester County Association for the Blind and Visually Impaired

Children's Vision Massachusetts

Cincinnati Association for the Blind and Visually Impaired

CVP

Emory Eye Center

Essilor Vision Foundation

Eye Bank Association of America

EyeSight Foundation of Alabama

Florida Agencies Serving the Blind

FOUNDATION FIGHTING BLINDNESS

Georgia Eye Bank, Inc.

Hadley Institute for the Blind & Visually Impaired

Heartland Eye Consultants

Hellen Keller International

Illinois Society for the Prevention of Blindness

International Eye Foundation (IEF)

Kansas Society of Eye Physicians and Surgeons

Kresge Eye Institute/Wayne State University
Lighthouse Central Florida
Lighthouse Guild International
Lighthouse Louisiana
Lions Eye Bank of Nebraska, Inc.
Lupus and Allied Diseases Association, Inc.
Middle Tennessee Council of the Blind
MidWest Enterprises for the Blind, Inc.
Missouri Council of the Blind
National Alliance for Eye and Vision Research
National Association of Chronic Disease Directors
National Association of School Nurses
National Caucus and Center on Black Aging, Inc.
Nevada Council of the Blind
New York Vision Rehabilitation Association (NYVRA)
NYU Langone Health
OHSU – Casey Eye Institute
Olmstead Center for Sight
OneSight
Opticians Association of America
Oregon Academy of Ophthalmology
Outlook Business Solutions
Outlook Enrichment
Outlook Nebraska
Perkins School for the Blind
Prevent Blindness Georgia
Prevent Blindness Iowa
Prevent Blindness North Carolina
Prevent Blindness Northeast Region
Prevent Blindness, Ohio Affiliate
Prevent Blindness Texas
Prevent Blindness Wisconsin
Radio Talking Book Service
SEE International
Seva Foundation
The Macula Society
The Vision Council
The Vision Resource Coalition
University of Alabama Birmingham School of Optometry, Department of Optometry and Vision Science
Willis Eye Hospital
Wisconsin Council of the Blind and Visually Impaired
Vision Forward Association, Inc.
Vision Health Advocacy Coalition
Vision Impact Institute
VisionServe Alliance
Vision Source
Volunteer Optometric Services to Humanity International
Volunteer Optometric Services to Humanity-OHIO Chapter
VOSH/California
VOSH Iowa