

## **Sight for Sore Eyes: Older workers suffering from eye diseases may change vision benefit landscape**

By Lydell C. Bridgeford

As Americans' life expectancy increases, so does the likelihood of vision loss from eye diseases, according to the National Eye Institute.

Specifically, the institute - part of the National Institutes of Health - finds that by 2020, 5.5 million Americans will be affected by blindness or low vision, up from 3.3 million today.

The most common eye diseases suffered by U.S. adults age 40 and over are age-related macular degeneration (AMD), glaucoma, cataracts and diabetic retinopathy.

"As our population lives longer, eye disease will be an even greater concern," says Dr. Elias Zerhouni, director at NIH.

As older individuals stay in the workforce longer, such eye diseases become a concern for employers, whose vision benefits can help prevent and detect vision problems and avoid most of the costly major medical claims for treating them.

### **Silent thieves of sight**

Glaucoma, a leading cause of blindness, occurs when excessive pressure inside the eye damages the retina, optic nerve or both.

The eyes generate fluid to help the eyeball maintain its shape. Yet too much fluid can put pressure inside the eye, thus damaging sensitive nerve tissues. The condition worsens over time and if untreated can cause blindness in three to 15 years.

Individuals with a family history of glaucoma or diabetes are at a higher risk of getting glaucoma. So are people who are extremely nearsighted.

African Americans are three times more likely to get glaucoma than non-Hispanic whites, according to the American Medical Association. About 2.2 million U.S. citizens have been diagnosed with glaucoma, and most of them are over the age of 50.

Most comprehensive eye exams - virtually always covered by vision benefits - include a glaucoma test, which involves the dilation of the pupil and the familiar air puff test that blows air into the eye.

Although there generally are no symptoms or signs in the early stages of the disease, it's easily treated if detected early.

Treatment - generally covered by major medical rather than vision insurance - includes medication and laser surgery to drain the eyes, relieving pressure and slowing down or stopping the progression of the disease.

Age-related macular degeneration attacks one part of the retina (macula) and occurs when the light-sensitive tissues in that region fail to regenerate correctly.

As the cells die, patients get a smudge at the center of the visual field that slowly expands. AMD exists in two forms: wet and dry. The dry form occurs when cells in the macula break down, while the wet form is caused by abnormal blood vessels that leak blood and fluid under the retina.

Dry AMD - which is less likely to cause vision loss - is treated by vitamin therapy. Several treatments are available for the wet form (see sidebar). Treatment also usually is covered by medical insurance.

Another common eye condition associated with aging is cataracts, which clouds the eye's natural lens. More than 20 million Americans age 40 and older have cataracts, according to Prevent Blindness America, a Chicago-based eye-health group. Cataracts typically strike more women than men.

Although painless, cataracts develop gradually over time and result in blurry vision, poor night vision, halos around lights and sensitivity to bright sunlight or glare at night. Cataracts generally are surgically removed.

### **Increasing member outreach, advancing technology**

As noted earlier, treatment for glaucoma, cataracts and age-related macular degeneration are "typically performed on the medical side," confirms Erich Sternberg, president at AlwaysCare Benefits, a Louisiana-based vision insurance provider.

After making an early diagnosis, optometrists and ophthalmologists usually are an active partner with patients' primary care providers to ensure proper follow-up treatment.

As such, vision benefits typically are seen as a proactive intervention measure to combat eye disease. Yet as age-related eye illness become a larger public health issue, employers may have to move beyond traditional vision benefits that mainly focus on eye exams and routine eyewear.

"As the population ages, we are going to see a greater utilization of the benefit because more people are going to be in tune with the fact that they need to go in more regularly," says John W. Lahr, the vice president of provider relations and the medical director at EyeMed Vision Care, which provides vision benefits.

"In the future, you are going to see a different type of buyer who wants a vision plan that does more than just exams, glasses and contacts. They want plans that will focus on getting people in

to get the care that they need," Lahr says.

More employers are requesting plans that actively engage members, and many vision benefit programs have a utilization rate of 30% to 40%, he observes.

"Employers are also asking us to help them with wellness and disease management initiatives for eye health," he says.

To help its members with eye health issues, AlwaysCare added an eye health center portal to its members-only Web site that allows individuals to go online to present questions to optometrists and ophthalmologists.

"We wanted to empower the consumer with as much information as possible," says Sternberg.

Ironically, while technology can help treat older workers with eye diseases and inform them about their conditions, as older workers stay longer in a digital workforce, they face computer eye strain, which includes symptoms of blurred vision, dry eyes, glare sensitivity and headaches.

"Twenty years ago, we didn't have people typing on laptops and personal digital assistants while on buses and trains with harsh lighting, commuting two or more hours after sitting in front of a computer nearly all day," observes Mike Colhoun, a vice president at Aon Consulting.

"The technology has led to a stronger need for vision benefits in supporting a workforce as it ages."

While some employers realize they have to occasionally increase maximums for routine eyewear because of rising market prices, some might now have to consider setting up workstations that make it easier on the eyes.

"Close-vision requirements in the workplace are definitely contributing to a greater need for vision care services," says J.C. Preas, vice president of field marketing at Companion Life, a vision insurance provider.

### **Sticking with the basics**

While member outreach and technology are helping to enrich vision benefits and prevent eye disease, experts still maintain basic eye exams are invaluable to plan design.

According to the Society for Human Resource Management, nearly 73% of employers offered vision insurance last year.

Cheryl Johnson, vice president of health care services at VSP, believes that number will jump significantly in the next couple of years as more employers realize a routine eye exam can be the first place where a potential serious chronic condition is caught.

Johnson explains that research shows nearly 55% of the U.S. adult population has an eye exam each year, which the profession recommends.

Yet, 16% of the population visits a doctor for preventive care, according to research by VSP, the U.S. Census and the National Center for Health Statistics.

"In fact, age-related macular degeneration is one of the specific disease types we ask our doctors to report as they submit claims to us, along with glaucoma, diabetes and hypertension, all of which are very significant diseases that affect both eye and systemic health," she says.

The eyes offer an unobstructed view of a person's blood vessels, which can provide a snapshot into visual health and overall wellness.

Johnson believes employers and their vision benefit providers need to work together to increase awareness of the importance of getting an eye exam, thus helping to identify and manage people, no matter what their age, with eye diseases.

Tom Davis, executive director of Spectera UnitedHealth Dental, a Maryland-based vision benefit provider, says: "The main thing is eye health. You really need to look at a vision plan as a way to make sure people are taking care of their eyes." As about 90% of Americans 55 and older need some type of corrective eyewear, Davis believes vision plans can help facilitate better eye care for the aging workforce. - L.C.B.

## **Treatments for AMD**

Age-related macular degeneration (AMD) is strongly linked with increasing age, especially after age 60. The disease exists in two forms, wet and dry. Wet AMD involves more extensive treatments, including:

**Photodynamic therapy.** A laser activates a powerful medication, which has been injected into the bloodstream. When activated, the medication works to shrink and destroy abnormal blood vessels.

**Protein-based drug therapy.** Medication is injected directly into the eye to attack key proteins needed to form abnormal blood vessels under the retina.

**Laser photocoagulation therapy.** A laser pinpoints abnormal, leaky blood vessels under the retina and seals them.

**Macular surgery.** One technique slices away tissue where leaky blood vessels are growing. Another lifts the macula from surrounding tissue and moves it to a healthier area of the retina