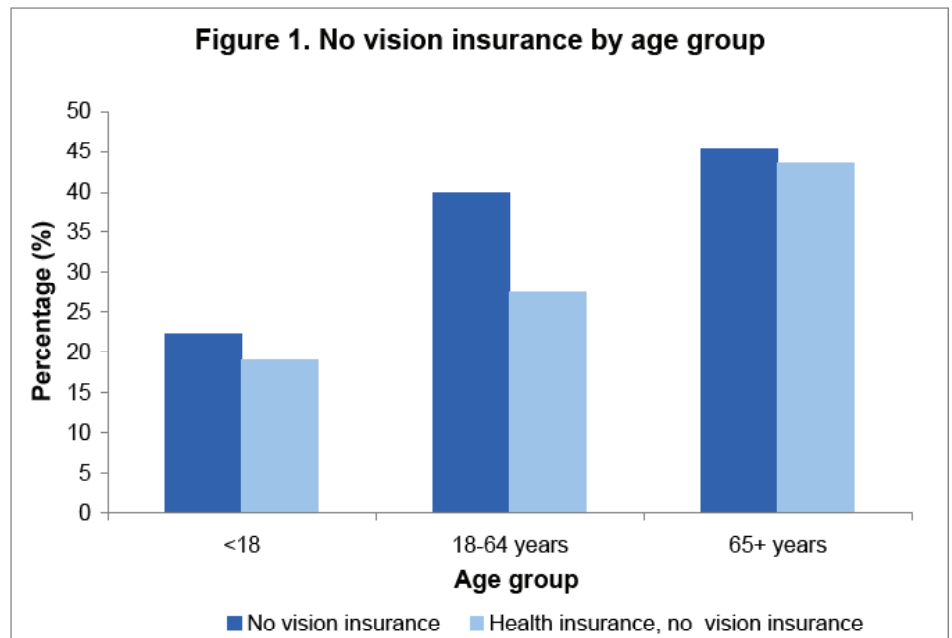


Vision Coverage and Health in the State of Ohio

The ability to see clearly is often taken for granted, but is integral to functioning across different life stages. Vision problems will affect a child's ability to read and therefore potentially learn, setting the stage for learning issues throughout the educational years. In the working population, visual difficulties cause accompanying symptoms (i.e. headaches) and may decrease productivity in the affected individuals. The ability to live independently is a concern for elderly individuals with vision disease.



Almost two-in-five children and adults in the state of Ohio lack vision coverage. Even among those adults who do have general insurance coverage, more than one-quarter have no vision insurance, making them 27% less likely to have received an eye exam within the past two years. Those without vision insurance were almost 30% more likely to rate their eyesight no better than fair compared to those with vision insurance. The frequency of adults below the poverty level without vision insurance is high, close to half of adults under 250% of the poverty level lack coverage. Thirty percent of adults have forgone a needed vision service (i.e. eyeglasses) because of a lack of insurance or cost.

Data on which these numbers are based were collected by the 2008 Ohio Family Health Survey (OFHS) representing 50,994 individuals. Addressed here are the issues related to vision insurance and vision care among adults and children in the State of Ohio.

I. General Findings

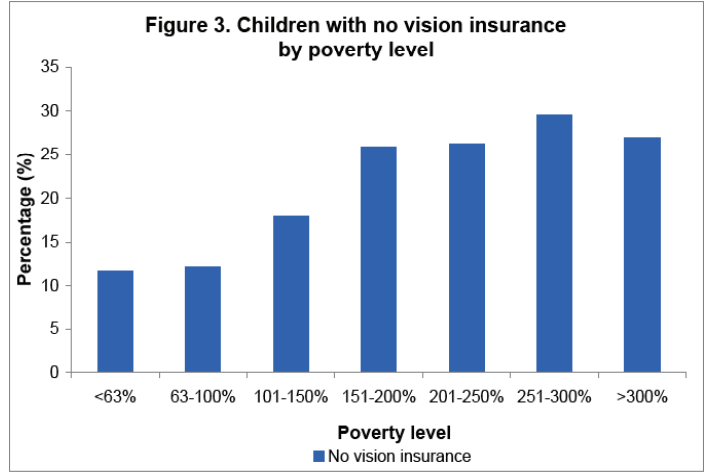
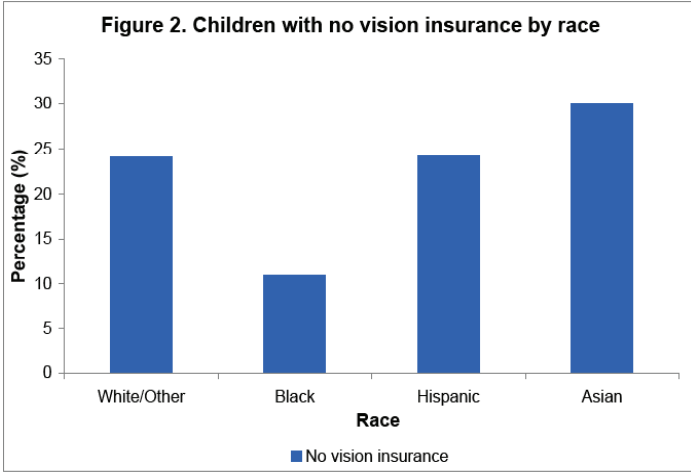
- 22.4% of children report no vision insurance.
- 39.9% of adults ages 18 to 64 report no vision insurance.
- 50.7% of seniors report no vision insurance.

Also, many Ohioans who report having health care insurance report not having vision coverage (Figure 1). For instance, 18.9% of children reported having health insurance but no vision coverage; 27.6% of adults ages 18 to 64 having health insurance but no vision coverage; and 45.3% of seniors having health insurance but no vision coverage.

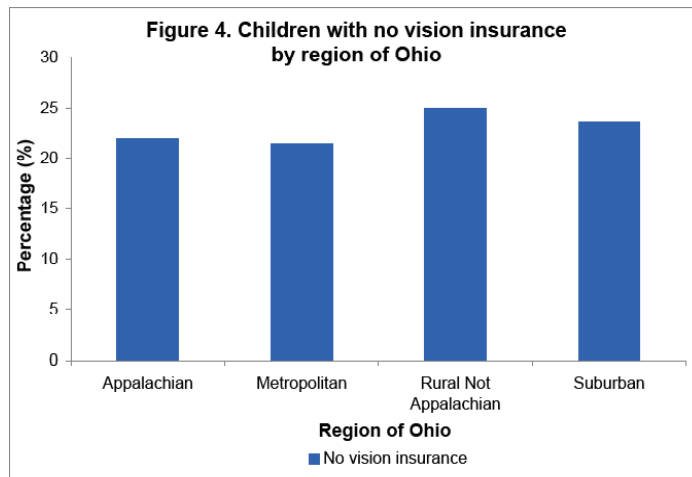
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II. Children Without Vision Insurance

Figures 2 to 4 show the percentage of children without vision insurance by three demographic characteristics: race, poverty level, and residential region.



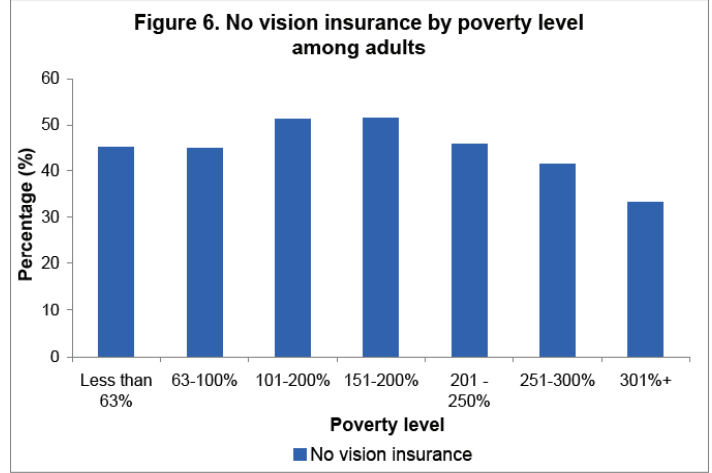
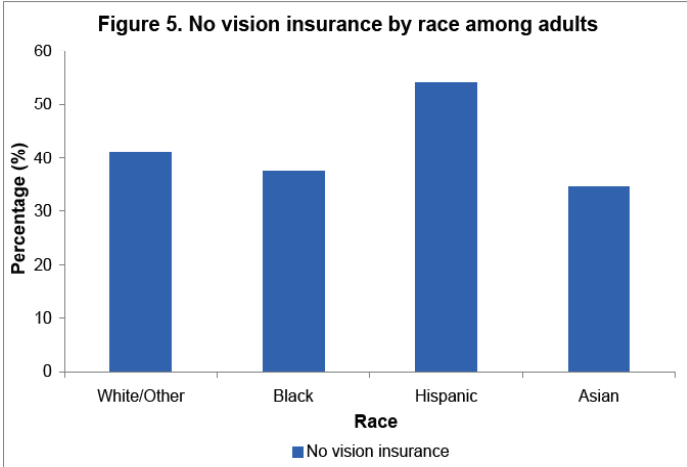
- Figure 2 shows Black children having vision coverage most often. Asian children were most frequently without vision insurance (38.2%).
- More than 25% of those reporting income above 151% of the Federal Poverty Level (an annual income of \$25,700 for a family of three in 2007) were without vision insurance (Figure 3) compared to 11.7% of those less than 63% of poverty level.
- Figure 4 indicates that children’s vision coverage varies between 21.4% and 25%, with rural non-Appalachian having the highest percent for non-coverage.



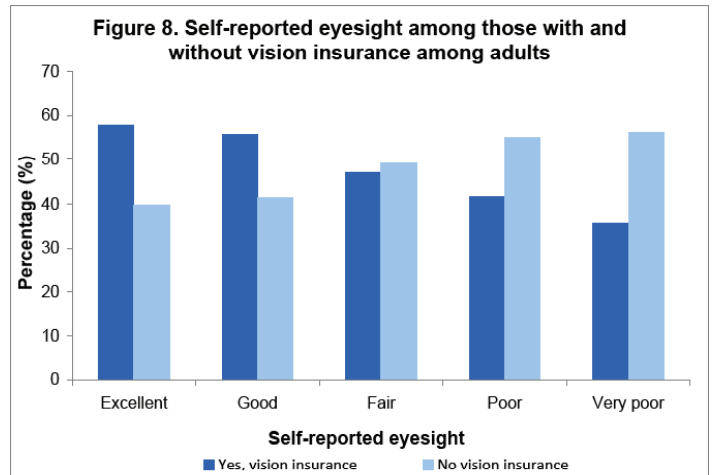
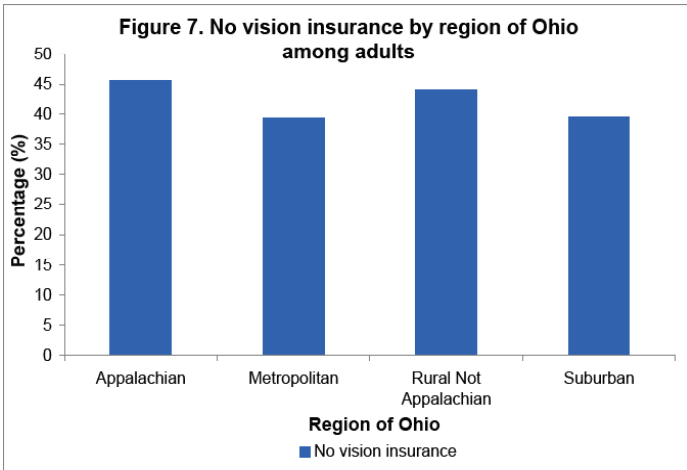
Vision Coverage and Health in the State of Ohio

III. Adults Without Vision Coverage

Figures 5 to 8 address race, poverty, demographic region, and self-rated eye health for adults aged 18 years and older. A higher percentage of Hispanic adults reported no vision insurance (54.1%), with Whites reporting 41.1%, Blacks 37.5% and Asians 34.6%.



- 50% of those reporting an annual income between 101% to 200% of the FPL reported having no vision insurance — compared to 33.5% of those more than 300% of poverty level.
- Lack of vision insurance coverage among regions of Ohio ranged from 40% to 45% (Figure 7).
- One question asked of adults was “At the present time, would you say your eyesight, with glasses or contact lenses if you wear them, is...” excellent, good, fair, poor, very poor. Almost 50% of those without vision insurance rated their eyesight no better than fair, compared with 38.6% of those with vision insurance (Figure 8).



IV. Eye Examinations

Recommendations for the frequency of eye examinations differ by age and risk status. For example, healthy adults may be advised to have an eye examination every 2 years, however those wearing glasses or contact lenses may have a different examination schedule than those with normal vision. Individuals with conditions such as diabetes or eye-specific diseases such as glaucoma or diabetic retinopathy may need to be seen more frequently. In at-risk groups, frequency of eye care can affect long-term visual outcomes, preventing permanent visual impairment. Therefore, striving for 100% compliance with eye exams is a challenge that needs to be met to reduce the risks of visual impairment.

Vision Coverage and Health in the State of Ohio

- Of those adults without vision insurance, 55.8% had received an eye exam within the past 2 years.
- Of those adults with vision insurance, 71.1% had received an eye exam within the past 2 years.
- Overall, of those adults who have not seen an eye care professional in the past 2 years, roughly 30% gave cost or no insurance as the reason for not seeking care.
- Of school-aged children (6 years and older) without vision care, 48.9% had seen an eye care professional within the past year, compared to 55.6% of those children who had vision insurance.
- If one expands the school-aged criterion to an eye exam in the past 2 years, 72.2% of children without vision insurance had an exam in the past 2 years, compared to 81.4% of children with vision coverage.

An example of an at-risk group not receiving care can be found among diabetics. Recommended eye exam follow-up for diabetics is on an annual basis to prevent development of diabetic retinopathy (a potentially blinding disease) and more frequently after the development of diabetic retinopathy. However, 36.9% of diabetics and 36.3% of borderline diabetics had not had an eye exam in the past year.

V. Health Care Needed but not Received

Over the past 12 months, 14.3% of adults did not receive any type of health care (which included eyeglasses) that they needed. Of those who responded that they did not receive vision care, 45.7% said that they needed it. The top reasons given for not getting care were that they could not afford it, were uninsured, or their general insurance did not cover vision care.

Over the past 12 months, 3% of children did not receive overall health care (which included eye care) that they needed. No vision care accounted for 38.3% of the care not received. The top reasons given for not receiving vision care were could not afford it, uninsured, general insurance did not cover vision care.

VI. Policy Considerations

Given the influence vision health has on overall health status in areas such as the mental and physical development of children, occupational safety for workers, and senior injury prevention, this data brief from the 2008 Ohio Family Health Survey shows the need for an expansion of vision insurance for all Ohioans. Given the race/ethnicity, region of residence, adult poverty, and age variations, expansion of vision health coverage should target populations of most need — particularly seniors, Hispanics, impoverished adults, and the uninsured. Additionally, expanding vision health coverage may also lessen risks to overall health status.

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