

Replacing Medicare visual acuity screening with dilated eye exams appears cost effective

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Replacing visual acuity screenings for new Medicare enrollees with coverage of a dilated eye exam for healthy patients entering the government insurance program for the elderly "would be highly cost-effective," suggests a study being published Online First by the *Archives of Ophthalmology*.

People can enroll in Medicare after they turn 65 and are supposed to receive a visual acuity screening and other preventive <u>health checks</u> as part of a Welcome to Medicare <u>health evaluation</u> within 12 months of enrollment. In 2009, the U.S. Preventive Services Task Force reversed its 1996 recommendation in favor of visual acuity screening because of insufficient evidence to support it. Whether Medicare will continue to include visual acuity screening in its initial preventive physical examination is undetermined.

"Our results support the conclusions of the U.S. <u>Preventive Services</u> Task Force that currently recommended visual acuity screening in primary care settings cannot be demonstrated to result in meaningfully different outcomes than no screening," the study suggests.

David B. Rein, Ph.D., of Public Health Research at NORC at the University of Chicago, and colleagues used a Monte Carlo cost-effectiveness <u>simulation model</u> with a total of 50,000 simulated patients with demographic characteristics matched to people 65 years old. They excluded patients with diabetes because the cost-effectiveness of visual screening for these patients has been established. They also excluded



patients with diagnosed eye disease.

The study results suggest that compared with a no-screening policy, dilated eye evaluations increased quality-adjusted life years (QALYs) by 0.008 and increased costs by \$94. A visual acuity screening increased QALYs in less than 95 percent of the simulations and increased total costs by \$32 per person.

"Our research suggests that the current policy of visual acuity screening is a suboptimal use of resources and that replacing this policy with coverage of a dilated eye evaluation for all healthy patients entering Medicare would be highly cost-effective," researchers conclude.

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