



NATIONAL ASSOCIATION
OF VISION CARE PLANS

ADDRESSING THE NEED FOR EDUCATION ON THE VALUE OF VISION CARE PLANS

CONSENSUS FROM THE NAVCP MEMBER MEDICAL ADVISOR ROUNDTABLE

ROUNDTABLE OVERVIEW

Recognizing the growing trend in consumer-driven health care and the need to ensure that eye care is recognized as an important aspect of overall health and wellness, Transitions Optical, Inc. sponsored a roundtable of medical advisors from the National Association of Vision Care Plans (NAVCP) to address the need for consumer education on the value of their vision plans. The event was held immediately preceding the NAVCP's annual conference on April 18, 2007.

During the roundtable, participants heard presentations by moderator Tim Fortner, trade development manager, Transitions, on the state of current perceptions of vision and vision care, and on the shortcomings of the traditional view of eye care.

Participants also heard from Jerry Berggren, director of research and information, National Association of Dental Plans, on how the dental industry has helped establish the importance of proper oral care in the minds of consumers.

Using these insights as inspiration, the group identified some of the most significant challenges to changing consumer perceptions of vision care plans, and brainstormed ways to overcome these issues. An overview of the presentations delivered, and the outcomes of the subsequent discussions, are captured in this consensus paper. The paper concludes with the collective group's recommendation for next steps on behalf of the NAVCP.

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PERCEPTIONS OF VISION CARE AND VISION WEAR PLANS

Sight is our most valued sense. This isn't surprising considering what an amazing organ the human eye is. The eye is approximately the size of a ping pong ball, yet possesses over 2,000,000 moving parts with an excess of 130,000,000 photoreceptor cells. Their task is to convert light into chemical-electrical impulses that are sent via the optic nerve to the brain, giving us the ability to perceive the world around us. The average person blinks 11,500 times each day, and in that

time, the eyes expend the same amount of energy that leg muscles would if they walked 50 miles.ⁱ

Yet, if 80 percent of our individual knowledge of the world around us comes through our eyes, then why have only 14 percent of school-aged children had an eye exam?ⁱⁱ And why do consumers see their dentist three times more often than their eyecare professional?

It's not because of cost. While other health care expenses are spiraling, costs in the eye care and optical industry have not even kept up with inflation. The Department of Labor Statistics reports that between 1986 and 2003, the inflation rate for all consumer goods was 66 percent – and the cost of eye care and eyewear rose just 56 percent. During those years, hospital costs rose 200 percent, dental care costs rose 142 percent and all medical costs rose 150 percent. Compared to eye care and eyewear, other medical costs went up by nearly three times.

Despite the fact that vision is so valued, it is clearly not top-of-mind with consumers. This is dangerous, given the trend in consumer-driven health care.

CONSUMER-DRIVEN HEALTH CARE

Consumer-driven health care basically means more choices for consumers among plan options. More broadly, it means that consumers are taking a greater interest in their health.

The number of consumers who proactively seek health information online has more than tripled over the past decade.ⁱⁱⁱ This includes many from the massive Baby Boomer generation, which is in the process of turning 60. As individuals care for their ailing parents, they see a mirror of what is to come if they don't take an active role in their own health, prompting them to take action. Nearly 90 percent of medical physicians report that their patients have brought information to their appointment that was found on the Internet. In fact, the popularity of attempting to self-diagnose through the Internet has led to the adoption of a new word in today's vernacular – cyberchondriacs.

At the same time, pharmaceutical companies and others with stakes in consumer health-care spending are engaged in unsurpassed advertising spending – chasing the wealthy Baby Boomer generation and other health-conscious Americans. A recent issue of *Reader's Digest* included more than 50 pages of advertising for pharmaceuticals. All this advertising is reminding consumers about the different aspects of their health that they need to care for – making them more interested in this topic, and bolder when it comes to researching and being more involved in their own health care.

While consumers are more interested in their health care than ever, they still only have a finite

attention span and only so many dollars to spend. This, coupled with the large number of companies and non-profits all communicating the importance of their aspect of health, has created a situation where the optical industry must compete for the consumer's attention.

A NEED TO EDUCATE

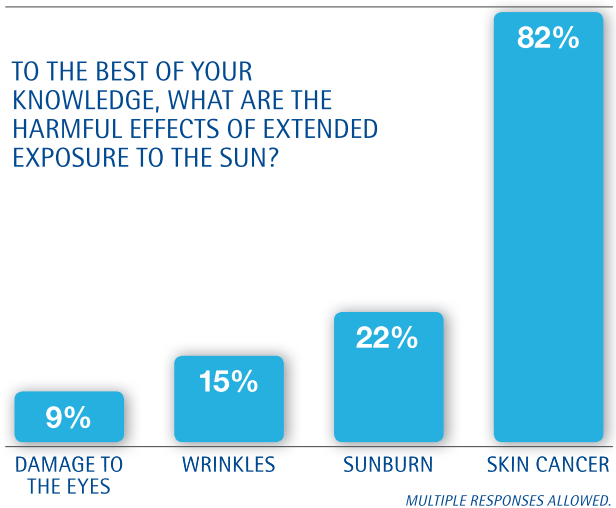
The current state of understanding among consumers of vision care and their vision care plans is relatively poor in comparison to other aspects of health care.

Consumers value their vision and intuitively understand its importance. In fact, in a recent report by the American Foundation for the Blind, losing sight was tied with paralysis as the health condition that would have the most negative impact – considered worse than HIV/AIDS, cancer, stroke and several other serious medical conditions.

Despite this acknowledgement of the value of vision, consumers mostly think of perfect vision only in terms of seeing 20/20, and don't really understand what they need to do to take care of it. Consumers have low awareness of several critical aspects of eye health. For example, nearly 20 percent of adults have never been to an eye doctor.^v Additionally, while 82 percent of consumers know that UV can cause skin cancer, only 9 percent know it can harm the eyes.^{vi}

Consumers also do not make the proper association between eye health and overall health and wellness. While 80 percent strongly associate getting a prescription with getting an eye exam, only 48 percent strongly associate an eye exam

UV AWARENESS

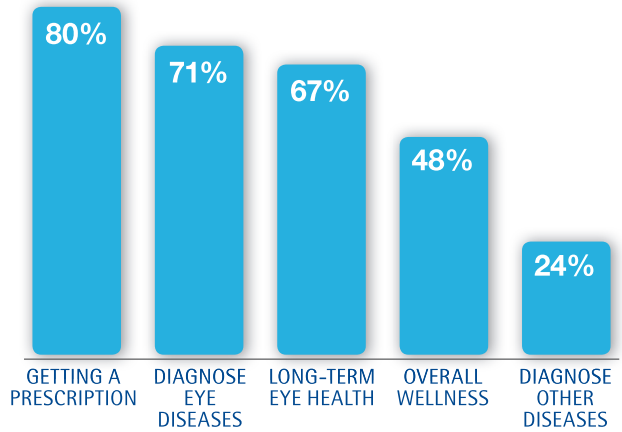


with overall wellness; and only 24 percent strongly associate diagnosis of non-eye-related diseases.^{vi} This is reflected in their opinions of managed vision care. Basically, consumers value vision plans less than they do medical, dental and pharmacy plans. While 97 percent say a medical plan is somewhat or very important, only 84 percent say the same for vision.^{vii} Some place such little value on their vision coverage that they don't even opt-in for it.

It's not a surprise that with less value placed on vision plans, consumers are also less knowledgeable about them. While eight out of 10 say they are highly/somewhat knowledgeable about medical, only six in 10 say the same for vision.^{vii}

GETTING AN EYE EXAM

ADULTS STRONGLY ASSOCIATE THE FOLLOWING REASONS WITH GETTING AN EYE EXAM.



To summarize, consumers care about their vision, but they don't know how to best take care of it – and don't see the connection to overall health. So, they don't recognize the value of their vision plans and are not knowledgeable about them.

To change this paradigm, the integral steps of increasing consumer awareness about how to care for their eye health/ vision, and how this care is linked to their overall health, are critical to changing perceptions of managed vision care.



SHORTCOMINGS OF TRADITIONAL VIEW OF EYE CARE

Those in the optical industry are highly familiar with the importance of eye care, recognizing that eye health is an important public health issue, as well as an employee productivity concern. According to the *Journal of the American Medical Association*, a National Institute of Health (NIH) study found that more than 11 million Americans have uncorrected visual impairment, such as nearsightedness, and need eyeglasses or contact lenses to improve their vision. Another study^{viii} found that there is a direct correlation between corrected vision and productivity. Even when employees' vision is only moderately miscorrected, such that they cannot tell the difference in their vision, their performance can be significantly decreased by as much as 20 percent. Many employees do notice the difference, however, considering that eyestrain is the number one complaint of office workers.^{ix}

There is already a traditional or basic view of helping people see better that most consumers hold, but it's fairly minimalist. For example, the patient is having trouble seeing, and probably assumes his

prescription is out of date. He goes to his doctor, who provides a vision exam and writes an updated prescription, and the optician helps the patient pick out nice eyewear.

The problem with the traditional view of the role of eye care and eyewear is that it doesn't hold up in a patient's everyday life. Vision wear in the real world must account for varying visual needs and lighting conditions, contrast sensitivity and UV- and impact-protection – so patients can see their best today, and have the greatest chance of seeing their best in the future. Basically, seeing 20/20 isn't enough.

TRADITIONAL VIEW OF EYE CARE



To determine if a patient has 20/20 vision during an eye exam eyecare professionals use the Snellen chart – a device that measures visual acuity based on the ability to see a three-inch black letter on a white screen at a distance of 20 feet. This resource was developed in 1862 by Dutch ophthalmologist Dr. Herman Snellen, and is still the most widely-used device to date. But this chart alone cannot determine all of a patient’s visual needs – and the minimalist view of vision care as a refraction and of vision wear as a simple appliance to correct vision does not tell the entire story.



SNELLEN CHART

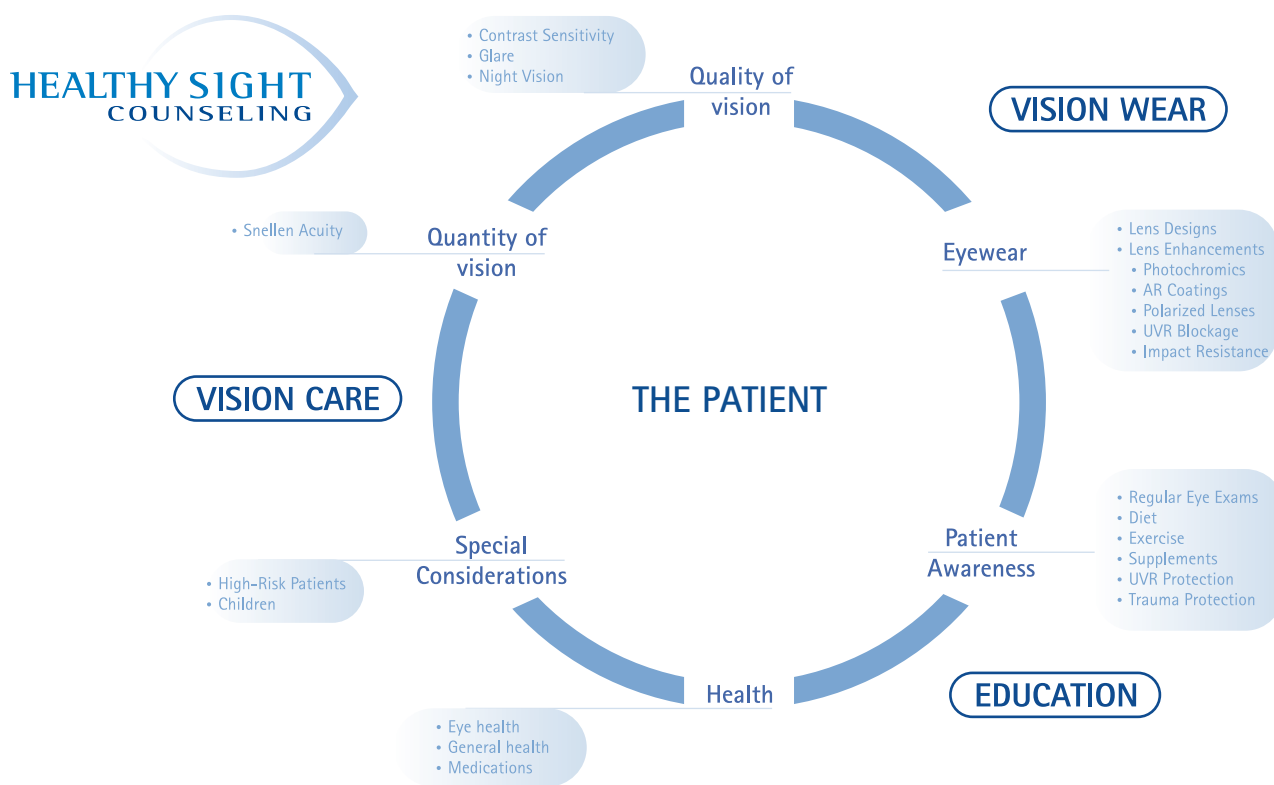
This limited view diminishes the importance of preventive care. And it ignores the potential for patients to enjoy enhanced vision in a range of real-world settings with today’s advanced eyewear. It also positions vision wear as a commodity rather than as a health product, leaving the consumer to consider price as their ultimate concern when making their eyewear selection. In fact, when consumers only view the eye exam as a means to achieve 20/20 vision, they may even take the leap to self-refraction. This is what consumers do

when they pick out readers – make the judgment, what looks better, one or two? It’s really a question of adequate vision versus healthy sight.

HEALTHY SIGHT

Achieving healthy sight is about more than just correcting vision to 20/20 in an exam room; it’s the enhancement of overall, everyday quality of vision and the preservation of long-term eye health. Simply put, optimal real-world vision...now and in the future!

To perpetuate a more comprehensive approach, Transitions supports the **Healthy Sight Counseling** model of eye care, which has three essential components: *Vision Care*, *Vision Wear*, and *Education*. Healthy Sight Counseling adopts the primary care model of treatment and prevention, which helps form a connection between eye care and overall health. This model also advocates educating consumers about all that will restore, maintain and enhance their vision. Both the World Council of Optometry and the National Federation of Opticianry Schools have accepted the principles of the Healthy Sight Counseling model, and are recommending the incorporation of such subject matter into educational curricula.



The model also emphasizes that **vision care is critical for eye and overall health**. Most people know that comprehensive eye exams are important because they can provide early detection of ocular diseases, such as glaucoma, cataract, macular degeneration and retinal detachment. With early treatment, there is a much higher chance of preserving vision. Less widely known, eye exams can often provide early detection of serious systemic diseases, such as diabetes, hypertension, arteriosclerosis, neurological disorders and brain tumors.

Despite low association between eye health and overall health, the link *is* there – healthy eyes are linked to a healthy body. In short, if you don't see well, you don't feel well. Eye strain leads to headaches and fatigue, which contribute to diminished performance on the job. Additionally, if you don't feel well, you may not see well. Many of the factors that we know affect our bodies – such as diet, medications and certain system diseases – can greatly impact vision. This means that vision care is a very important element of overall health care.

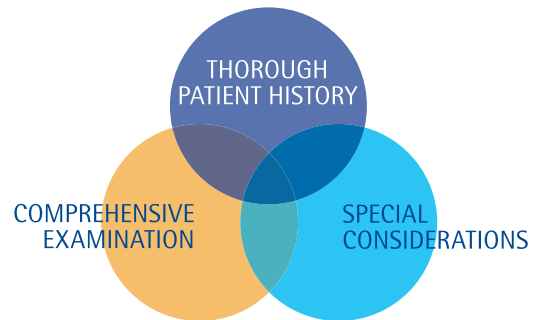
ROLE OF VISION WEAR AND EDUCATION

The good news is that managed vision care has helped bring more people in for exams. In 2004, 91 million Americans had their eyes examined. Sixty million of those exams were performed by independent eyecare professionals. This did not, however, translate into an increase in the amount of vision wear sold. Of the 91 million people who had eye exams, only 73 million were dispensed a new pair of eyeglasses; and of the 60 million people who had their eyes examined by an independent eyecare professional, only 32 million purchased eyeglasses. A major disconnect exists between the examination room and the dispensary.

The Healthy Sight Counseling model acknowledges that **vision wear is an important component of quality eye care**. Because of recent advancements by lens and frame manufacturers, today's eyewear can do more than just correct vision – helping to optimize vision for everyday activities, and playing an important role in protecting and preserving vision for the future. There are new and improved lens treatments to help minimize glare and reflections. Impact-resistant lenses and safety frames help protect against trauma. And, critical UV protection helps preserve vision for the future.

Vision wear should really be thought of for what it is – a form of “treatment” – which elevates it to a more medical level. The eyeglass prescription should be written based on the same factors as the medical prescription: thorough patient history, a comprehensive examination and special considerations. In fact, because the treatment is so tailored to the needs of the patient, the Healthy Sight Counseling model refers to it as a “customized eyeglass prescription.”

FACTORS INFLUENCING THE CUSTOMIZED EYEGLOSS PRESCRIPTION



Finally, **education is a critical aspect of eye care**. It enables greater understanding of the value of vision care and vision wear provided, and makes patients more likely to take steps to protect vision. Eyecare professionals are in an obvious position to provide education, but so are human resources professionals who are filling the role of educating employees on how to be smarter healthcare consumers.

Often, the only time a consumer thinks about health matters – beyond experiencing a problem – is at the time of benefits enrollment. By promoting comprehensive education on how to maximize health through benefits, HR managers are playing a critical role in encouraging preventive health care, and are helping their employees make smart choices to plan fiscally to meet their health needs. HR managers are challenged, however, to maintain a balancing act between controlling expenses and offering competitive benefits.

INSIGHTS FROM THE DENTAL INDUSTRY

Surprisingly, the idea of brushing your teeth twice a day and seeing the dentist twice a year did not originate from science. The now famous recommendation originated at least as early as the Great Depression. Pepsodent Toothpaste, in its sponsorship of the *Amos 'n' Andy* radio program, introduced this concept into the American psyche.

**"The spirit of today is progress.
Use Pepsodent Toothpaste twice a day,
see your dentist at least twice a year."**

- From the *Amos 'n' Andy Show*,
episode 375, circa 1929-1930

Ipana Toothpaste and Crest repeated similar advice in the '50s and '60s.

Organized dentistry adopted the same messages the advertisers promoted. The American Dental Association (ADA) communicated consistent messaging as it became active in consumer education several decades ago. It established the ADA Seal Program in 1931. The first ADA National Children's Dental Health Day occurred in 1949, and the first color television public service announcement ran in 1964. Additionally, Dudley the Dragon was introduced in 1971 to teach children proper oral health care, followed by the first "Give Kids A Smile[®]" day, held as part of National Children's Dental Health Month in 2003.

As consumers integrated the preventive messages they were hearing into their own dental hygiene habits, the first dental plans were created in the 1960s in California. Originally, dental plans were prepaid plans, similar in design to the dental HMO of today. As the plans formed, they were structured to meet the expectations of consumers – offering coverage based on the now-famous standard of seeing your dentist twice a year.

ORIGINATION OF NADP

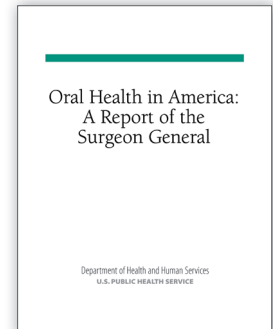
The National Association of Dental Plans (NADP) was founded in 1989, and was organized in an attempt to influence model legislation. It was originally incorporated as National Association of Prepaid Dental Plans representing dental HMOs, but its membership has evolved since that time. In the mid-1990s, the association dropped "prepaid" from its name and added PPOs to its membership roster. In 1999, discount (referral) plans were added, and in 2001, dental indemnity products were admitted. Today, the NADP includes more than 70 dental plan members, representing 132 million Americans with dental benefits.

The NADP's mission is to promote and advance the dental benefits industry to improve consumer access to affordable, quality dental care. The greater purpose of the NADP was established in its bylaws and includes educating consumers,

providers, the government and the business sector about the concept and advantages of dental benefit plans.

SURGEON GENERAL'S REPORT REINFORCED ORAL/OVERALL HEALTH CONNECTION

The education efforts of the entire dental industry were strengthened by an important event occurring in 2000, when the Surgeon General David Satcher released *Oral Health in America: A Report of the Surgeon General*. This was the 51st Surgeon General's report since 1964, when Luther Terry issued his landmark report on tobacco and health.



In addition to a lack of awareness of the importance of oral health among the public, the report found a significant disparity between racial and socioeconomic groups in regard to oral health and ensuing overall health issues. Based on these findings, the Surgeon General called for action to promote access to oral health care for all Americans, especially the disadvantaged and minority children found to be at greatest risk for severe medical complications resulting from minimal oral care and treatment.

This announcement put oral health in the consumer media spotlight, and effectively cemented the link between oral- and overall-health. It has served as important validation for many of the messages now carried by dental plan providers.

Several Evidence-Based Dentistry (EBD) journals and research consortia were created to further the research called for in the Surgeon General's Report. Studies published in the Journal of the American Dentistry Association (JADA) provided further fodder. The ADA recently received a grant to create a Web site to catalog the research and findings of Evidence-Based Dentistry. A cross-organizational coalition, the Oral Health Action Partnership (OHAP), was formed to respond to the Surgeon General's national call to action.

Scientific research has been supplemented by the research efforts of individual NADP member plans in recent months.

- In 2006, **MetLife** conducted a study establishing a link between good oral health practices and good oral health benefit programs. The research showed that of those who had dental benefits, 64 percent visited a dentist twice yearly – while only 24 percent of those without dental plans reported visiting the dentist the same number of times.
- Also in 2006, **Guardian** published a study demonstrating that consumers generally understand the link between oral health and overall health.
- Additionally, **Aetna** conducted a study with researchers from Columbia University’s College of Dental Medicine, who discovered a link between periodontal disease in mothers and low birth-weight babies. Because of this finding, Aetna and many other companies now offer periodontal disease screenings to expectant mothers.

CONSUMER PERCEPTION OF DENTAL BENEFITS

Dental benefits are consistently ranked in the top two or three health benefits by businesses and consumers, usually behind medical and pharmacy. There are several factors that contributed to helping dental plans achieve their current status in the minds of consumers.

There’s no questioning that consumers have a strong interest in appearance. Having straight, white teeth has long been a desired attribute, and has driven interest in taking steps necessary to preserve a good-looking smile.

Consumers were further influenced by the marketing messages by toothpaste brands such as Pepsodent, Ipana and Crest, and prepaid dental benefit plans were developed in response to market demand.

NADP AND CONSUMER MESSAGING

With the influence of consumer-driven healthcare, the NADP has been placing a greater focus on consumer messaging.

In 2005, the NADP held a CEO Retreat where attendees established top priorities for the dental benefits industry.

They included:

- Develop value message on dental benefits
- Develop value message on oral health
- Maintain strong relationship with ADA

An Ad-hoc Communications Task Force is currently overseeing message development and implementation.

CHALLENGES TO CHANGING CONSUMER PERCEPTIONS OF VISION CARE PLANS: INSIGHTS FROM ROUNDTABLE PARTICIPANTS

From the HR perspective, health care is the line item that eclipses all others, so minimizing its cost is a chief concern. Any programs – educational or otherwise – that increase the utilization of a health benefit can be viewed as contrary to this goal. Many HR professionals prefer to promote cheaper programs, such as exercise and weight loss. Managed care has come to be viewed as a way to manage cost. Facing a similar dilemma, many vision plans are structured such that quick increases in utilization could be problematic. To unify these industries, common ground must be found in the importance of education to ensure that vision care and vision wear remain a priority with consumers.

COSMETIC APPEAL

Fashion is the aspect of eyewear that tends to sell, and is what consumers often associate with their eyewear. Their vision benefits are almost viewed as quasi-medical. Of the two – fashion and medical – fashion can more easily be postponed, while medical treatment is perceived as a priority.

Because eyeglasses are often seen as a fashion accessory, they are not respected as a vision-enhancing and protective device. Furthermore, the lens, which serves the function of correcting and optimizing vision, is not recognized by consumers as important. More time and focus is spent on selecting frames than lenses. Several valuable lens options, such as AR and photochromics, are not covered (or not fully covered) by vision plans. This can devalue them in the minds of consumers.

The dental industry benefits from the fact that oral care is viewed as cosmetic and also medical. The actual (and fear of) pain associated with dental problems also serves to prompt consumer action.

LACK OF FOCUS ON EYE/ OVERALL HEALTH CONNECTION

The eye exam experience is not well understood and is viewed as a cost-containment benefit instead of as an important preventive measure to ensure overall health. Because the connection between eye and overall health is so poorly understood, the linkage between eye- and health-benefits is not understood either.

The schools that are training the current generation of eyecare providers are not uniform in the emphasis placed on the importance of educating patients on the link between eye- and overall-health and the health benefits of vision wear.

Eyecare professionals also face the challenge of having limited time with patients, so they often struggle squeezing in patient education.

Additionally, a standard of care is not agreed upon within the optical industry. The optometry and ophthalmology associations, for example, recommend different amounts of time between eye exams.

EDUCATION STRATEGY CONSIDERATIONS: INSIGHTS FROM ROUNDTABLE PARTICIPANTS

Taking a cue from the dental industry, a key strategy to elevating the value of an aspect of health care is to solidify public understanding of the standard elements of preventive care so that consumers come to expect this standard from their health professionals and their benefits plans. In the case of eye health and vision, what consumers hear in their daily lives through mass media should be reinforced by what they are hearing in the exam room and from their plan providers.

Eyecare professionals make significant investments in equipment to examine for eye disease. An additional investment should be made in training staff on what to say when administering the tests about what they *could* discover. This way, what consumers are hearing through popular media is said again by their eyecare providers for maximum impact. Companies like Transitions Optical are advertising with a health-related message that eyecare professionals can reinforce in-office.

To further drive home the connection between eye- and overall-health, all eye exams could include a blood pressure measurement. A simple

explanation of why blood pressure is being taken and the link between hypertension and eye disease could powerfully reinforce the preventive health nature of the exam – and its relevance to overall health. Taking blood pressure is currently part of the training offered to students at Southern College of Optometry.

The language used to describe aspects of eye care should also be reconsidered to more accurately convey the connection to overall health. Instead of “eye exam,” the industry could collectively refer to an “eye health exam.” Instead of “eyecare professional,” “eye health professional” could be considered.



As more vision plan providers are linked to medical providers, there is greater openness to recognizing the benefits of preventive eye care and its positive outcome for reducing costs of overall medical care down the road. Diagnosing glaucoma early through a comprehensive eye health/vision exam will save thousands of dollars in unnecessary medical costs for the patient’s medical benefits provider down the road if the condition worsens. Many of these vision providers and medical plan providers are positioned for cross-education, such as communicating to any patients diagnosed with diabetes that they should have their eyes checked. Getting a message from a health provider about the need for immediate eye care clearly drives home the connection between eye- and overall-health.

In cases where eyecare professionals face the challenge of limited time for patient education, practices could leverage tools, such as educational brochures or videos, that can be absorbed by patients while they are waiting for care, without requiring extra time from busy staff.

TAILORING MESSAGES BY AUDIENCE

Different audiences will care more about different implications of quality eye care. For the story of the value of eye care to be compelling to governmental bodies, it's important to communicate the cost of neglecting eye health, such as quantified by Jonathan Javitts in the presentation, "Preventing Vision Loss and Blindness: A Medical, Moral, and Economic Imperative," which he delivered during the 5th annual NAVCP annual conference. In the presentation, he estimates that by ensuring a single person with Type One diabetes gets proper eye care, the federal government will yield a net annual savings of approximately \$10,000 in budgetary expenditures. Further reinforcing the potential savings, Prevent Blindness America published a report in 2007 entitled "The Economic Impact of Vision Problems." This report estimates that the total annual financial burden of adult vision problems on the U.S. economy is \$34.5 billion. This burden comes from a combination of direct medical costs, plus other direct costs such as nursing, home care and government programs for the visually impaired; and the indirect cost of lost productivity for those in the labor force who are visually impaired.

HR managers, on the other hand, would be most interested in information about the links between

quality vision care and vision wear and employee productivity. The NAVCP can draw from existing research by its members and from industry associations to build a compelling story, particularly with HR professionals, similar to the story built to promote smoking cessation programs, with messages like "smoking leads to absenteeism." There is significant existing data, for example, on the number of employee complaints that result from eye strain, particularly at the computer.

To be successful, any core message communicating a standard of care must be simple and hard-hitting. It should also be created with the help of professional marketers. Ideally, it should reflect actions that consumers should take to seek help from a professional, as well as what they should do in their everyday lives. In dentistry, for example, the message is to see your dentist twice a year *and* to brush your teeth twice a day. Being aware of a preventive "healthy habit" to be completed on a daily basis helps make the concept of *preventive care* more personal and habitual, which may lead to greater compliance in the second half of the message – to see a professional regularly as well.

RECOMMENDED NEXT STEPS

The NAVCP should create a task force to rate and prioritize the ideas brought up in this consensus paper, and put a plan in place to execute them. One of the task force's primary responsibilities will be the development of a simple consumer-facing message communicating the eye- and overall-health benefits of eye health, vision care and vision wear. The task force will also make recommendations on how member organizations and non-profit partners should communicate this message. Professional associations can be consulted to ensure the message complements their own.

An additional charge of the task force should be to centralize information communicating the benefits of eye care targeted to HR- and government audiences to get them to "buy into" the standard of care. This could lead to a call-to-action or policy statement by the government that would promote a standard of preventive eye care. The NAVCP can then reference this statement in future communications, further encouraging consumers

to follow this standard of care and take advantage of the benefits offered by their individual plans.

POTENTIAL PROGRESSION OF EVENTS

NAVCP Establishes Simple Message Reflecting Standard of Care

Integration of NAVCP Standard of Care Message Into Individual NAVCP Member Communications

Government Education

"Call to Action" From Government

Integration and Leveraging of Call to Action Into Plans' Communications Efforts

CONCLUSION

Consumers value their sight and have a greater interest in taking care of their health than ever before. Yet they currently have poor understanding of the steps they need to take to preserve their vision, and do not associate vision care and vision wear with overall health and well-being. Because of this, consumers prioritize other aspects of preventive health higher than eyecare. With so many other health-care companies promoting their respective areas of health, vision must have a stronger voice to become more top-of-mind with consumers.

The NAVCP is in an excellent position to promote the communication of a uniform message for consumers reinforcing the value of vision care and

vision wear for overall health and wellness, helping elevate eye health and the importance of vision coverage in the minds of consumers. With a unified message communicated through the collective marketing power of member organizations, consumers will begin to understand how important it is to make their visual health a priority. Sharing of communication tools with HR and optical channel partners will further enable a consistent message to be delivered to consumers.

With the support of NAVCP members and industry partners, it is possible to work together to effectively address the need for education on the value of vision care plans.

REFERENCES

- ⁱ Optical Laboratories Association, Lens Menu, 2004.
- ⁱⁱ Poe GS. Eye care visits and use of eyeglasses or contact lenses. United States 1979 and 1980. Vital and health statistics. Series 10, No. 145, DHHS Publication (PHS) 84-1573, Hyattsville, MD: National Center for Health Statistics, 1984. Found at: <http://www.aoa.org/documents/CPG-2.pdf>. Accessed May 15, 2007.
- ⁱⁱⁱ UCLA Digital Future Report, 2004.
- ^{iv} Accel Report II, Medical Marketing and Media, 2003.
- ^v Vision Care Institute of Johnson & Johnson's "Americans are out of focus on proper vision care."
- ^{vi} Survey conducted on behalf of Transitions Optical, Inc. from March 9-13, 2006 by ICR, Media, Pa.
- ^{vii} 2007 Consumer Perceptions of Managed Vision Care (September 2006 data). Trended with December 2005, 2004 and 2003 data. A total of 8,299 interviews were conducted among consumers as part of Jobson's syndicated VisionWatch study.
- ^{viii} Study conducted by the University of Alabama at Birmingham (UAB) School of Optometry study (funded by PRIO Corporation and the Vision Council of America). Found at: http://www.prio.com/consumers/understanding_cvs.cfm. Last accessed on May 15, 2007.
- ^{ix} Cornell University, 1999 "Computers in the Schools."

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