Title: Cost-Benefit Analysis for Universal Cataract Coverage in India

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#### Conflicts of Interest:

None

#### Background:

Cataract is the most significant cause of curable blindness necessitating universal coverage. Here, we have estimated the scaleup costs for universal cataract coverage and the benefits of averting the economic burden of disease in India.

#### Methods:

We conducted retrospective analysis for 2018. We used data for cataract prevalence and disability-adjusted life-years (DALYs) from the Global Burden of Diseases (GBD) study and surgeries conducted under the government-sponsored program from the National Health Profile (2020). We used 10 per capita surgical costs: National Sample Survey on health consumption, six cataract surgical packages under the national health insurance, and direct, indirect, and societal costs from Aravind Eye Care Model, Madurai. For the cataract scale-up costs, we calculated the total need by multiplying cataract prevalence with per capita costs and the unmet need by multiplying the difference between the prevalence and surgeries achieved with the same costs. For economic benefits of averted cataract burden in 2018, we multiplied DALYs with non-health gross domestic product (i.e., GDP - Government Health Expenditure) derived from the National Health Accounts (2021). For net benefits, we subtracted the scale-up costs for meeting total and unmet needs from economic benefits. All monetary values were adjusted for inflation and converted to USD 2020.

#### Findings:

Annual scale-up costs for meeting total cataract needs were 921,852,056-4,898,629,084 USD in 2018. Costs for covering unmet needs were 718,584,854-3,818,487,619 USD. The economic benefit by averting the cataract disease burden was

12,429,100,755 [8,878,449,077, 16,662,568,954] USD. Annual net benefits for covering total needs are 7,530,471,671 to 11,507,248,698 USD. While those for covering unmet needs are 8,610,613,136 to 12,429,100,755 USD. All Indian states would benefit from cataract scale-up, i.e., positive net benefit values.

### Interpretation:

We found that universal cataract coverage would be cost beneficial for India. Scale-up of cataract surgeries to cover unmet needs makes up a small percentage of the country's GDP. This study looked at annual net benefits. Future studies should investigate projected benefits for the future.

Source of Funding: None

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#### INTRODUCTION

Cataract is the most common cause of curable blindness Minimum & maximum scale-up costs for meeting Minimum & maximum scale-up costs for meeting necessitating universal coverage in india.

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necessitating universal coverage in india'.

What we know: According to the Global Burden of Disease Study
(GBD)<sup>2</sup>, India had a cataract burden of 30.34 million in 2017-18.

According to the National Health Profile, the number of cataract
surgeries achieved during that time were only 6.66 million. India
has subsidized cataract surgery packages under national program
and government-funded health insurance- Pradhan Mantri Jan
Arogya Yojana (PMJAY).

What we don't know:

What we don't know:

The amount of money government needs to invest for universal cataract coverage.

Would the money spent by the government be beneficial?

· Our three main aims:

To calculate scale-up costs for meeting total and unmet cataract

coverage needs.

To calculate the economic benefits of disease burden averted by

cataract surgeries.
The net benefits for cataract coverage scale-up.

#### METHODS

We conducted a retrospective analysis for India and its 30 states for 2018.

Variables	Date Sources
Cataract prevalence and disability-adjusted life-years (DALYs)	GBD 2019
No. of free/subsidized cataract surgeries in a year conducted under national program	National Health Profile 2020
Cost of cataract surgeries	PMJAY Benefits Package List 2.0, National Sample Survey 2017-18, Aravind Eye Care Model
Gross State Domestic Product per Capita (GSDP), Total Health Expenditure per Capita (THE), Government Health Expenditure (GHE), and Gross Domestic Product (GDP)	National Health Accounts (NHA) 2021

#### Scale-Up Costs Analysis

We used ten cataract surgical package costs in two cataract needs

Scale-up costs for total needs = (cataract prevalence)\*(cataract surgical package cost)

 $Scale\text{-up costs for unmet needs} = (cataract\ prevalence\text{-}cataract$ surgeries conducted)\*(cataract surgical package cost)

#### Analysis of Economic Benefits of Averted Disease Burden<sup>3</sup>

Economic Benefits (Value of Life-Year or VLY) = {(GSDP - THE)\* 2.8}\*DALY

For states, we consider GSDP and THE. For India, we consider GDP and GHE

#### **Benefits Analysis**

Mean net benefits for total needs = Mean VLY - scale-up costs for

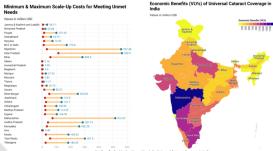
Mean net benefits for unmet needs = Mean VLY - scale-up costs

All costs were adjusted from INR to USD as per USD value in year 2020. 95% uncertainty intervals were propagated from DALYs to

### FINDINGS



Economic benefits of averted burden for India are 12.4 (95%UI: 8.9 - 16.7) billion USD. nic Benefits (VLYs) of Universal Cataract C





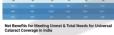




had the largest

net benefit.





Andhra Pradesh



# Minimum & maximum net benefits for meeting total needs for coverage in India are 7.5 & 11.5 billion USD.



#### CONCLUSIONS

- Universal cataract coverage would be cost-beneficial for India as the scale-up costs
- Universit cataract coverage would be cost-beneficial for india as the scale-up costs of covering numet needs make up only a small percentage of India's GDP.
  Caveats: The study assumes that all cataract surgeries would prevent blindness. Moreover, if doesn't account for all causes of cataract, like congenital cataract and cataract due to metabolic reasons.
  This study looked at annual net benefits. Future studies should investigate projected benefits over years extending beyond 2030.

- Manusus, S. et al. Current estimates of the consonic burden of bindness and visual impairment in India. A cost of illness study. Indian Journal of Ophthodisology. 70, 2341 (2022).

  GBD Compute. Patrice for Health Mexics and Evaluation laws. Visib healthdata or general computer. Jamison, D. T. et al. Global health 2035: a world converging within a generation. The Lancet 382, 1898–1955 (2013).

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