

REVENUE: No revenue impact

FISCAL: Minimal fiscal impact, no statement issued

---

Action: Do Pass as Amended and Be Printed Engrossed

Vote: 5 - 0 - 0

Yeas: Atkinson, Beyer, Burdick, Ferrioli, Rosenbaum

Nays: 0

Exc.: 0

Prepared By: Erin Seiler, Administrator

Meeting Dates: 6/13

---

**WHAT THE MEASURE DOES:** Requires health benefit insurers that cover prescription eye drops for glaucoma to also cover one early refill of that prescription if: refill is requested within 30 days of dispensing original or previous refill, prescription includes specific number of refills, refill requested does not exceed that number, and prescription has not been refilled more than once during preceding 30 days. Specifies time period for health insurer to request refund of paid claim and specifies time period for health care provider to request additional payment and to resubmit claim denied by or refunded to a different insurer. Declares emergency, effective on passage.

**ISSUES DISCUSSED:**

- Need to address unintended problems from Senate Bill 508 (2009)
- Consensus product of insurers, Oregon Medical Association, and Oregon Ambulatory Surgical Centers Association on issue of overpayment
- Difficulty getting eye drops in the eye and other ways patient may run out of eye drops
- Critical role of eye drops in treating glaucoma

**EFFECT OF COMMITTEE AMENDMENT:** Replaces original measure.

**BACKGROUND:** Currently, health insurers may request a refund of payment made to a health care provider in writing within 24 months after the date the payment was made that outlines the reasons the insurer believes that the provider owes the refund. Senate Bill 860-A reduces from 24 months to the earlier of 18 months or a date specified by contract, the time period in which a health insurer may request a refund from a provider.

According to the Glaucoma Research Foundation, “In the last few years, many glaucoma patients who use eye drop medications have been faced with more stringent restrictions on their prescriptions. Insurance companies now impose limits on quantities of eye drops and refill intervals. However, many patients have trouble putting in exactly one drop, precisely onto the eye. It is natural to have some drops miss the eye or to have two drops come out at once. This unavoidable waste of drops is one reason that some patients run out of their drops too soon.”

Senate Bill 860-A does not mandate coverage of prescription eye drops, but requires that *if* prescription eye drops are covered, then one early refill must also be covered, under certain conditions.