



# MEMORANDUM IN OPPOSITION

**FOR IMMEDIATE RELEASE: MAY 23, 2011**

**Re: S.1430 (Saland)/A.1219 (Bing) – An act to amend the insurance law, in relation to prescription coverage for eye drops.**

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This legislation, S.1430/A.1219, would require health plans to provide coverage for refills of prescription eye drops when the refill is requested prior to the expiration of the period of suggested use. The New York Health Plan Association (HPA) opposes this legislation because it promotes bad medication policy and would ultimately result in increased costs for individuals and employers purchasing health insurance in New York.

The bill would expand the optional pharmacy benefit to provide coverage refills of prescription eye drops prior to the expiration of the fill period. Health plans currently allow members to refill their medications prior to the refill date in instances where the medication is lost or stolen by simply contacting the health plan. This bill would allow refills of a medication because of over utilization, which is dangerous to the patient and can lead to serious adverse reactions. Medical literature indicates that patients who are inconsistent in adhering to medication regimens — including “not taking as prescribed,” or taking more or less than the prescribed dosage — can be subject to serious side effects and exacerbate their underlying medical condition.

Additionally, this legislation favors eye drop drugs over other drugs used in treatment of other serious or chronic diseases, giving patients using prescription eye drops more favorable pharmaceutical coverage than patients with numerous other diseases. This is inherently unfair and will result in higher pharmaceutical costs for patients with other diseases, as they will end up cross subsidizing the increased drug costs of the patients utilizing prescription eye drops.

Pharmacy benefits are optional benefits in New York and employers have the choice to purchase a drug rider or not. The cost of a drug rider is critical for employers in determining whether to provide drug coverage to their employees or not. Mandating coverage of medication refills prior to the expiration of the fill period will increase the overall costs for pharmacy benefits. As a result, individuals and employers seeking health insurance coverage will either pay more for prescription drug coverage or go without it.

In 2007, the New York State Health Care Quality and Cost Containment Commission was established to analyze the impact any proposed mandate would have on health insurance costs and quality of care. This analysis would look at current plan practices with regard to the benefit, review medical literature related to the potential impact on health care quality, and assess the possible premium impact of the proposed mandated benefits as well as the potential for avoided costs through early detection and treatment of conditions or more cost-effective delivery of medical services. At this time, not all of the appointees to the commission have been submitted. Until the commission is in place, any new mandates proposals including this one should be prohibited.

At a time when many New Yorkers are struggling to afford the health insurance coverage they have, and when the state is working to implement federal health care reform and expand access to coverage to more New Yorkers, this bill is ill advised. We urge you to say no to S.1430/A.1219 and to seek solutions that will make insurance more affordable and available to more New Yorkers.

*The New York Health Plan Association represents 25 managed care health plans that provide comprehensive health care services to nearly 7 million New Yorkers.*