



February 28, 2020

Senator Bob D. Hackett
Senate Building
1 Capitol Square
1st Floor
Columbus, OH 43215

Will Melofchik
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RE: Draft Model Act Regarding Vision Care Services

Thank for the opportunity to comment on Draft Model Act Regarding Vision Care Services. The Health Benefits Institute opposes this proposed model. The model will eliminate consumer's right to discounted medical services provided through their insurance company contracts. In short, the proposal creates significant harm by allowing medical providers the ability to raise prices on consumers who have no insurance coverage for specified services.

The Health Benefits Institute is a group of agents, brokers, insurers, employers, benefit platforms and others seeking to protect the ability of consumers to make their own health care financing choices. We support policies that expand consumer choice and control, promote industry standards, educate consumers on their options and foster high quality health outcomes through transparency in health care prices, quality, and the financing mechanisms used to pay for care.

Insurers typically contract with medical providers for a range of services including covered and uncovered services. In some cases, the consumer may find – for a variety of reasons – that the services they need or want are not covered by their insurance provider. The consumer has relied on the insurer to provide access to a network of providers and in exchange the medical provider has agreed to provide a discount. Medical providers agree to a lower fee in exchange for steerage but these consumers – steered to a contracted medical provider through the insurance contract – will no longer have a right to the receive the agreed upon discount. Vision providers want to have their cake and eat it too but make no mistake, this is a subset of the surprise billing problem we have been hearing about. Consumers left with uncovered services and medical providers who refuse to honor a contracted price. As a matter of practice it bans all vision providers – some of whom may agree with the practice – from contracting for the discounts. We urge legislators to stand in for consumers.

We understand vision providers will indicate they are forced to accept unfavorable contracting terms with insurers. They have the option to reject the contract, and if enough of them reject these contracts insurers will be forced to change their contracting practices. There is no public good that will accrue if this practice is banned, NCOIL will merely be siding against patients.

If NCOIL moves forward, the proposed simple disclosure is not enough. If medical providers wish to abdicate their contractual obligations, they should be required to make available all prices to every consumer at the time the appointment is scheduled. The state licensing authority can set requirements for patient disclosures via rule.

Thank you for your consideration. We look forward to working with you on this model.

Thank you again for providing an opportunity to comment on the proposed Vision Care Services Model Act. Please do not hesitate to contact me if you have further questions at jpwieske@thehealthbenefitsinstitute.org or (920) 784-4486.

Sincerely

A handwritten signature in green ink, appearing to read "JP Wieske", with a long horizontal flourish extending to the right.

JP Wieske
Executive Director