HEALTH BENEFITS INSTITUTE

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November 9, 2026

The Honorable Sarge Pollock, Chair
NCOIL Health Insurance & Long-Term Care Issues Committee
Kentucky Legislature
Room 416, Capitol Annex
702 Capitol Avenue
Frankfort, KY 40601

Re: Opposition to the Draft Model Act Ensuring Access to Eye Care Services and Materials for Patients Through Transparent and Fair Business Practices by Vision Benefit Plans

Dear Chairman Pollock and Members of the Committee:

The Health Benefits Institute (HBI) appreciates the opportunity to comment on the October 16, 2026, draft of the *Model Act Ensuring Access to Eye Care Services and Materials for Patients Through Transparent and Fair Business Practices by Vision Benefit Plans*.

HBI supports meaningful consumer protections, transparency, competition, and policies that preserve access to affordable insurance and supplemental benefits.

HBI strongly opposes the proposed model. Despite the latest revisions, the proposal continues to leave unaddressed the key concerns raised by insurers and other industry stakeholders since at least June.

The proposal would replace voluntary, market-based contracting with government mandates, disrupting long-standing arrangements that help keep vision benefits affordable and accessible. At the same time, it would create unprecedented statutory protections for the financial interests of optometrists, elevating one provider type's business concerns above the needs of consumers.

The model repeatedly conflates the commercial interests of optometrists with consumer protection. Policies that mandate higher reimbursement, prohibit reasonable network management, and increase provider control over retail pricing may benefit providers financially, but there is no evidence that they improve affordability, access, quality, or outcomes for consumers.

Summary of HBI's Principal Concerns:

- **Government-Mandated Reimbursement:** Establishes reimbursement floors and protects providers against financial losses under voluntarily negotiated contracts, effectively shifting business risks to insurers.
- **Any Willing Provider Requirements:** Restricts insurers' ability to establish selective provider networks, potentially requiring participation by additional optometrists even when existing networks adequately serve consumers.
- **Restrictions on Consumer Discounts:** Limits negotiated discounts on noncovered services and materials, potentially increasing consumers' out-of-pocket costs while allowing providers to charge higher prices.
- **Laboratory and Supplier Restrictions:** Interferes with negotiated laboratory and purchasing arrangements that help insurers control costs, maintain quality standards, and provide affordable eyewear.
- **Claims Administration and Payment Integrity:** Restricts insurers' ability to apply coding edits, bundle services, and recover improper payments, undermining established claims administration and fraud prevention practices.
- **Excessive Administrative Requirements:** Imposes burdensome disclosure, contracting, and communication mandates that increase compliance costs without demonstrating corresponding consumer benefits.
- **Overly Broad Regulatory Scope:** Creates uncertainty for comprehensive medical insurers, third-party administrators, and self-funded employer plans, including potential ERISA preemption concerns.
- **Expanded Regulatory Enforcement:** Retains broad enforcement provisions that could expose insurers to overlapping regulatory authority and disproportionate penalties.
- **Departure from Established NCOIL Principles:** Abandons NCOIL's traditional emphasis on transparency and fair contracting in favor of

government intervention in private negotiations, provider reimbursement, and network management. NCOIL has traditionally worked its process via consensus and there are widely disparate views on the efficacy of this model.

Taken as a whole, the proposal would impose costly government mandates that distort competition, erode the freedom of private parties to negotiate contractual terms, benefit a limited group at the expense of all others including consumers, and ultimately increase the cost of vision benefits for the consumers and employers who rely on them.

HBI respectfully urges the Committee not to advance the proposed model. Instead, the Committee should pursue targeted consumer protections that preserve voluntary contracting, competition, and affordable vision benefits.

We appreciate the Committee's consideration of these concerns and look forward to continued engagement.

Thank you for the opportunity to submit these comments. Please do not hesitate to contact me at gjohnson@monumentadvocacy.com if you have any questions.
Sincerely,

Sincerely

Greg Johnson