November 4, 2026

The Honorable Sarge Pollock, Chair
Members and staff of NCOIL Health Insurance & Long-Term Care Issues Committee

Re: EyeMed Opposition to the NCOIL Draft Vision Benefit Model Act

Dear Chairman Pollock and Members of the Committee:

On behalf of EyeMed Vision Care®, we appreciate the opportunity to provide comments on the proposed National Conference of Insurance Legislators (NCOIL) Vision Benefit Model Act. EyeMed Vision Care® administers vision benefits for employers and families, serving millions of members across the US. Vision benefits are designed to keep quality care for consumers affordable and accessible. In fact, EyeMed members report 97% strong satisfaction with their ability to access care and understand their benefits.

EyeMed supports policies that promote transparency, strengthen consumer choice and expand access to affordable, high-quality vision care. However, EyeMed strongly opposes the proposed model legislation. Despite extensive stakeholder engagement and feedback, several key concerns raised by vision benefit administrators and affected stakeholders remain unresolved in the current draft, which contains requirements that fundamentally alter the vision benefits marketplace, increase costs, and limit consumer savings.

Summary of Principal Concerns:

The Proposal Threatens Affordability and Consumer Savings

Section 4 of the draft model act would remove negotiated discounts on noncovered services and materials in provider agreements, resulting in consumers paying more for vision products and services when using their vision benefits than they would pay in the retail market. These restrictions will reduce valuable savings opportunities for consumers, diminish the value of employer-sponsored vision benefits, and increase out-of-pocket costs for families.

The Proposal Introduces Government Mandated Provider Reimbursement

Sections 2(Q) and 4(B) introduce government mandated reimbursement standards replacing market-based reimbursement negotiations with statutory reimbursement requirements. These provisions will increase plan costs, which will ultimately be borne by employers, plan sponsors and consumers without evidence of corresponding improvements in access, quality or health outcomes.

The Proposal Restricts Network Benefit Design and Network Flexibility

Employers and health plans rely on flexibility to offer vision benefits that meet the needs of their employees and members while managing costs. Sections 5, 6 and 7 of the draft model act would impose significant limitations on provider contracting, network participation and benefit design. These provisions would significantly limit the ability of carriers and vision benefit administrators to design networks, negotiate provider participation and develop benefit structures that meet employer and consumer needs while maintaining affordability.

The Proposal Creates Significant Regulatory Oversight & Administrative Burden

Section 3 introduces extensive public disclosure obligations, including detailed corporate information, litigation histories and complaint records. These requirements would add significant administrative complexity without a clear connection to improving consumer experience.

Additionally, the broad definitions of third-party administrators and subcontractors in Section 2 extend compliance obligations to entities that do not directly administer vision benefits, creating unnecessary uncertainty and administrative burdens.

Combined with mandatory provider communication timelines, contract amendment requirements and expanded enforcement provisions, these obligations will increase operational costs and divert resources away from ongoing efforts to improve the provider and member experience and expand access to care.

Conclusion

Rather than enhancing consumer protections, the current draft risks increasing costs, reducing flexibility, and undermining the value that vision benefits provide to employers and consumers.

For these reasons, **EyeMed respectfully urges the Committee not to advance the draft model legislation**. We encourage the Committee to address the substantive concerns that have been raised throughout the stakeholder process and work toward a balanced framework that preserves affordability, consumer choice and access to care.

Respectfully,



Matt MacDonald
President, EyeMed Vision Care®