



**WISCONSIN ACADEMY  
OF OPHTHALMOLOGY**

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**TO:** Senator Patrick Testin, Chair  
Members, Senate Committee on Workforce Development, Military Affairs  
and Senior Issues

**FROM:** Suzanne Falkenberry, MD, Vice-President

**DATE:** February 8, 2018

**RE:** Support for Senate Bill 771

On behalf of the more than 400 members of the Wisconsin Academy of Ophthalmology, we appreciate the opportunity provide testimony in support of Senate Bill 771 – coverage for early prescription eye drop refills. It is important for the committee to understand precisely what SB 771 does.

Prescriptions for eye drop medications are written in a form similar to this:

Place 1 drop in each eye twice daily for 30 days; two refills authorized.

In the bottle there will be enough medication to cover that anticipated 120 drops prescribed, and the patient can have the prescription refilled twice before returning to her/his doctor to receive a new one. Unlike pills, however, it is very easy to waste eye drop medications and patients regularly run out of eye drop medications before the anticipated days-usage. Medicare Part D allows early refills of eye drop medications once 70% of the anticipated days-usage has passed (or after 21 days for a 30-day prescription); Wisconsin Medicaid similarly allows early refills at 80%. SB 771 requires that Wisconsin health plans authorize early refills at 75% of the anticipated days-usage.

SB 771 does not require health plans to cover any medications. SB 771 does not require health plans to cover any additional refills not prescribed by a patient's doctor. SB 771 simply requires health plans to authorize early refills of medication they already cover so patients do not go without sight-saving medicines.

Many Wisconsin health plans already authorize early eye drop refills voluntarily. But ophthalmologists and optometrists regularly hear from patients whose eye drops have run out early and whose health plan will not pay for a refill until the original prescription length has expired. Many of these patients cannot afford to pay for a refill from their own pocket and instead may go without medication. With eye conditions like glaucoma, even a brief period without medication can lead to permanent eye damage to the patient's eye and eyesight.

SB 771 does not require health plans to cover or pay for anything they do not already cover – simply that they do so earlier for eye drop medications if necessary. More than 25 states already require early eye drop refills by health plans; please help us add Wisconsin to this sight-saving list.



(LRB-5243/1)

State of Wisconsin / OFFICE OF THE COMMISSIONER OF INSURANCE

Scott Walker, Governor  
Theodore K. Nickel, Commissioner

Wisconsin.gov

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February 7, 2018

Senator Scott Fitzgerald  
Senate Majority Leader  
Room 211 South  
State Capitol  
P.O. Box 7882  
Madison, WI 53707

Representative Robin Vos  
Speaker of the Assembly  
Room 211 West  
State Capitol  
P.O. Box 8953  
Madison, WI 53708

**Re: Social and Financial Impact Report—2017 Senate Bill 771 Coverage of Prescription Eye Drop Refills.**

Dear Majority Leader Fitzgerald and Speaker Vos:

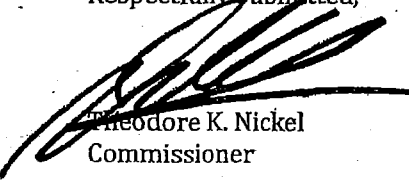
Pursuant to s. 601.423, Wis. Stat., the legislature has requested the Office of the Commissioner of Insurance (OCI) to complete a social and financial impact report on 2017 Senate Bill 771, relating to coverage of prescription eye drop refills. The proposed bill would require insurers to cover a refill of prescription eye drops when 75 percent or more of the days have elapsed from the original distribution date, or date of the last refill, and the consumer is allowed another refill under their current prescription.

As currently written, the proposed bill does not mandate new or expanded coverage or co-pays for health insurance consumers or insurers. Rather, the proposed bill permits the presale of a prescribed medication refill. Many insurers already cover early refills as a matter of process. OCI does not anticipate this bill will increase costs to health insurance consumers or insurers.

For this reason, OCI will not be preparing a social and financial impact report as allowed under s. 13.0966(2) (b), Wis. Stat.

Please contact Elizabeth Hizmi at (608) 267-9460 or [Elizabeth.hizmi@wisconsin.gov](mailto:Elizabeth.hizmi@wisconsin.gov) if you have questions.

Respectfully Submitted,

  
Theodore K. Nickel  
Commissioner