Illinois Society of Eye Physicians & Surgeons  
HB 3137 - Questions & Answers  
March 14, 2015

Why is this bill needed?

When patients with chronic eye diseases run out of their drops, they may face the choice of going without their medicine or paying the full retail price (often more than $100) when the insurance company denies coverage for the “early” refill. Most ophthalmologists (eye physicians & surgeons) report that they have patients who are impacted by this problem.

Why do patients “run out” of their eye drops?

Studies have shown that as many as 64% of patients “waste” eye drops either by putting too much into the eye, or by missing the eye completely. Approximately 31% of patients miss the eye and put the drop on their nose, cheek or eye lid. “Aim” also is affected by other factors such as Parkinson’s, tremors, stroke, aging, poor vision, apprehension about putting a drop in the eye, and the small size of the bottles which may be hard to grip. In addition, generic eye drop bottles may have variations in fill levels, and tip size can affect the rate at which medicine is dispensed from the bottle.

Does this bill apply to oral medications too?

Patients taking pills (oral medications) obviously don’t have the same problems of wasted doses which is common with some eye drop patients. This bill applies only to topical medications.

Have any other states passed this measure?

At the present time, eleven other states have enacted laws requiring coverage for early refills of eye drops for treatment of chronic eye diseases. Currently, at least eight other states – besides Illinois – are considering similar bills. In addition, the Federal government adopted a policy for Medicare that provides for refill coverage once 70% of the anticipated days of a prescription have passed.

What conditions and diseases are covered by this bill?

The bill applies only to those topical prescription medications (i.e., eye drops) used to treat chronic eye diseases such as glaucoma, dry eye, some inflammatory diseases of the eye, and certain retina diseases.

Won’t this cost health insurers a lot of money?

If insurance plans thought this requirement would be costly, they would be actively lobbying against the bill. We are not aware of any such opposition. In fact, some insurance companies already cover early refill of eye drops, as does the Federal government under Medicare. The Chicago Tribune reported that Blue Cross Blue Shield of Illinois is neutral and Land of Lincoln Health supports the bill.

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How many people would be affected by this bill?

A relatively small number of patients overall will need “early refills” of eye drops for chronic eye disease treatment. But those who are affected run the risk of permanent vision loss because of missed doses or find themselves having to pay hundreds of dollars extra for medicine that otherwise is covered by insurance.

This bill is drafted very narrowly and is targeted at only those patients with chronic eye diseases which require ongoing topical medication (eye drops). It does not apply to all eye drop prescriptions, nor would the bill apply to patients who are covered by Medicare which already has an early refill policy in place.

Out of the total population, a small percentage have chronic eye disease. For example, about 1.9% of the Illinois population over the age of 40 has glaucoma (although it is estimated that half of them don’t know they have it and therefore are not being treated). Of these patients, approximately 1.6 million Illinois residents receive Medicare benefits who would not be affected by this bill.

The small percentage of all residents who have chronic eye disease treated by eye drops, are not covered by Medicare, and who end up running short means the cost to health payers is likely to be very low. But, these patients are at great risk of permanent vision loss if they miss doses of their medication.

What happens if patients skip doses of eye drops used to treat their chronic disease?

Uncontrolled eye diseases can lead to permanent vision loss or even blindness. For example, it is critical for glaucoma patients to control the intraocular pressure of the eye all the time. Increased pressure can lead to damage of the optic nerve which cannot be repaired and leads to vision loss or total blindness.

What is the impact if a patient loses vision?

Vision loss can impair an individual’s independence and their ability to work. Blindness clearly has a significant cost to a patient, their family and society. Low vision and blind patients may require direct financial assistance, as well as help with transportation and daily living, all at great expense.

What is ISEPS? Who are its members?

ISEPS is the Illinois Society of Eye Physicians and Surgeons. Its members are physicians – medical doctors – who specialize in ophthalmology. More than 500 Eye M.D.s practice in every part of the state and provide medical and surgical treatment of eye disease, as well as routine vision care such as eye glasses and contact lenses. After four intense years in medical school, ISEPS members then complete a year of general medicine internship followed by three years of ophthalmology residency caring for thousands of patients under supervision of faculty. Many eye physicians also complete one or two year fellowships in a specific aspect of ophthalmology.