AN ACT CONCERNING PRESCRIPTION EYE DROP REFILLS.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

Section 1. (NEW) (Effective January 1, 2010) (a) As used in this section, "health insurance policy" means any individual health insurance policy or benefit plan that is delivered, issued for delivery, renewed, amended or continued in this state by an insurer, health care center, hospital service corporation, medical service corporation, fraternal benefit society or governmental entity that provides medical benefits to Medicaid, HUSKY Plan, Charter Oak Plan, ConnPACE or state-administered assistance recipients.

(b) Each individual health insurance policy providing coverage of the type specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-469 of the general statutes delivered, issued for delivery, amended, renewed or continued in this state on or after January 1, 2010, that provides coverage for prescription eye drops, shall not deny coverage for a renewal of prescription eye drops (1) when the renewal is requested by the insured less than thirty days from the later of (A) the date the original prescription was distributed to the insured, or (B) the
date the last renewal of such prescription was distributed to the
insured, and (2) when the prescribing physician indicates on the
original prescription that additional quantities are needed and the
renewal requested by the insured does not exceed the number of
additional quantities needed.

Sec. 2. (NEW) (Effective January 1, 2010) (a) As used in this section,
"health insurance policy" means any individual health insurance policy
or benefit plan that is delivered, issued for delivery, renewed,
amended or continued in this state by an insurer, health care center,
hospital service corporation, medical service corporation, fraternal
benefit society or governmental entity that provides medical benefits
to Medicaid, HUSKY Plan, Charter Oak Plan, ConnPACE or state-
administered assistance recipients.

(b) Each group health insurance policy providing coverage of the
type specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-
469 of the general statutes delivered, issued for delivery, amended,
renewed or continued in this state on or after January 1, 2010, that
provides coverage for prescription eye drops, shall not deny coverage
for a renewal of prescription eye drops (1) when the renewal is
requested by the insured less than thirty days from the later of (A) the
date the original prescription was distributed to the insured, or (B) the
date the last renewal of such prescription was distributed to the
insured, and (2) when the prescribing physician indicates on the
original prescription that additional quantities are needed and the
renewal requested by the insured does not exceed the number of
additional quantities needed.

This act shall take effect as follows and shall amend the following
sections:

<table>
<thead>
<tr>
<th>Section</th>
<th>Date</th>
<th>Amendment</th>
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<tbody>
<tr>
<td>Section 1</td>
<td>January 1, 2010</td>
<td>New section</td>
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<tr>
<td>Sec. 2</td>
<td>January 1, 2010</td>
<td>New section</td>
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Statement of Purpose:
To provide coverage under health insurance plans to patients needing refills of prescription eye drops in less than thirty days.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]