

Senate Bill 43

By: Senators Brass of the 28th, Mullis of the 53rd, Miller of the 49th, Albers of the 56th,  
Ginn of the 47th and others

**AS PASSED SENATE**

**A BILL TO BE ENTITLED**

**AN ACT**

1 To amend Code Section 33-6-4 of the Official Code of Georgia Annotated, relating to the  
2 enumeration of unfair methods of competition and unfair or deceptive acts or practices and  
3 penalty, so as to provide that certain actions by health care insurers offering eye care benefit  
4 plans constitute unfair trade practices; to provide for definitions; to provide for a short title;  
5 to provide for related matters; to provide for an effective date and applicability; to repeal  
6 conflicting laws; and for other purposes.

7 **BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA**

8 **SECTION 1.**

9 This Act shall be known and may be cited as the "Noncovered Eye Care Services Act."

10 **SECTION 2.**

11 Code Section 33-6-4 of the Official Code of Georgia Annotated, relating to the enumeration  
12 of unfair methods of competition and unfair or deceptive acts or practices and penalty, is  
13 amended by deleting "or" at the end of paragraph (14.2) and by adding a new paragraph to  
14 read as follows:

15 “(14.3)(A) As used in this paragraph:

16 (i) 'Covered eye care services' means those health care services and materials related  
17 to the care of the eye and related structures and vision care services for which a health  
18 care insurer is obligated to pay for or provide to covered persons under an eye care  
19 benefit plan, which includes services for which reimbursement is available under such  
20 plan, or for which reimbursement would be available but for the application of  
21 contractual limitations such as deductibles, copayments, coinsurance, waiting periods,  
22 annual or lifetime maximums, frequency limitations, alternative benefit payments, or  
23 any other limitation.

24 (ii) 'Covered person' means any subscriber, enrollee, member, beneficiary, or  
25 participant, or his or her dependent, for whom benefits are payable when such person  
26 receives eye care services rendered or authorized by an ophthalmologist licensed  
27 under Chapter 34 of Title 43 or an optometrist licensed under Chapter 30 of Title 43.

28 (iii) 'Eye care benefit plan' means any individual or group plan, policy contract, or  
29 subscription agreement which includes or is for eye care services that is issued,  
30 delivered, issued for delivery, or renewed in this state whether by a health care  
31 insurer, health maintenance organization, preferred provider organization, accident  
32 and sickness insurer, fraternal benefit society, nonprofit hospital service corporation,  
33 nonprofit medical or eye care service corporation, health care plan, or any other  
34 person, firm, corporation, joint venture, or other similar business entity that pays for,  
35 purchases, or furnishes eye care services to patients, insureds, beneficiaries, or  
36 covered dependents in this state.

37 (iv) 'Health care insurer' or 'insurer' means an entity, including but not limited to  
38 insurance companies, health care corporations, health maintenance organizations, and  
39 preferred provider organizations, authorized by the state to offer or provide health  
40 benefit plans, eye care benefit plans, programs, policies, subscriber contracts, or any

41 other agreements of a similar nature which compensate or indemnify health care  
42 providers for furnishing covered eye care or other health care services.

43 (B) No insurer shall require an ophthalmologist or optometrist to accept as payment an  
44 amount set by such insurer for services that are not covered eye care services under the  
45 covered person's eye care benefit plan.

46 (C) No insurer or other person acting as a third-party administrator shall procure  
47 providers for any eye care benefit plan that sets ophthalmologist or optometrist fees for  
48 any services except covered eye care services.

49 (D) No insurer shall draft, publish, disseminate, or circulate any explanations of benefit  
50 forms that include language that directly or indirectly states or implies that an  
51 ophthalmologist or optometrist may or should extend discounts to patients for  
52 noncovered eye care services.

53 (E) No insurer shall require or encourage an ophthalmologist or optometrist within its  
54 provider network to extend any discounts on services that are not covered eye care  
55 services; or"

56 **SECTION 3.**

57 This Act shall become effective July 1, 2021, and shall apply to all policies or contracts  
58 issued, delivered, issued for delivery, or renewed in this state on or after such date.

59 **SECTION 4.**

60 All laws and parts of laws in conflict with this Act are repealed.