

MEMO



SB1199

Senate of Pennsylvania

November 16, 2009

TO: ALL SENATORS

FROM: Stewart J. Greenleaf *Stewart*

SUBJECT: Cosponsorship -- **Lyme and Related Tick-Borne Disease Education, Prevention and Treatment Act**

I am introducing legislation enacting the Lyme and Related Tick-Borne Disease Education, Prevention and Treatment Act.

The intent of the legislation is to provide the public with information and education to create greater public awareness of the dangers of and measures available to prevent, diagnose and treat Lyme disease and related maladies. Additionally, it will ensure that: (1) Physicians, insurers, patients and governmental agencies are educated that multiple treatment approaches exist; (2) Physicians and other medical professionals provide patients with sufficient information about all treatment options to enable patients to make an informed choice; (3) Insurance reimbursement be provided for treatment rendered in accordance with the standard of care chosen; and (4) State government agencies provide unbiased information regarding material treatment options, including the current two standards of care, The Infectious Disease Society of America (IDSA) and The International Lyme and Associated Diseases Society (ILADS).

The legislation directs the Department of Health to establish a task force on Lyme disease and related tick-borne diseases to investigate and make recommendations to the department regarding: (1) Prevention; (2) Raising awareness of long term effects of misdiagnosis of Lyme disease; and (3) Development of a public information and education program which shall include the broad spectrum of scientific and treating views regarding Lyme disease and related co-infections, including the multiple standards of care available that are currently represented by IDSA and ILADS. The department is directed to coordinate the educational program with the Pennsylvania Game Commission, the Department of Conservation and Natural Resources, the Department of Education and health care provider professional organizations.

Under the bill, health insurers would need to provide coverage for treatment of Lyme disease rendered in accordance with the standard of care and documented in the physician's medical record for that patient and with the informed choice and consent of the patient. Two schools of thought (standards of care) have emerged regarding the diagnosis and treatment of Lyme disease. The IDSA guidelines, which most insurers have adopted, provide for a short-term treatment of antibiotics. The guidelines issued by ILADS provide for a longer term treatment with antibiotic therapies for persistent and chronic Lyme disease not cured by short term protocols. Both guidelines are evidence-based and found on the National Guideline Clearinghouse website. Given that more than one standard of care exist, the insurer should reimburse for either one so long as the treating physician informs the patient of the treatment options and the patient consents. All jurisdictions that have considered the matter have found two standards of care in the treatment of Lyme disease.

The legislation would also give physicians the right to diagnose and treat Lyme disease and related maladies if the diagnosis and treatment approach have been documented in the patient's medical record. In addition, no physician shall be subject to professional misconduct proceedings or to disciplinary action by the State Board of Medicine or the State Board of Osteopathic Medicine solely for prescribing, administering or dispensing long-term antibiotic or antimicrobial therapy for a therapeutic purpose for a patient clinically diagnosed with Lyme disease or related tick-borne illnesses if the diagnosis and treatment approach have been documented in the medical records of the patient. It is my understanding that physicians in neighboring states have been brought up on charges and sanctioned by medical boards for treating chronic or persistent infection with Lyme disease over a long term. Similar language was recently enacted in the State of Connecticut to protect physicians from such actions, and also to diffuse the "chilling effect" such sanctions have had on physicians in diagnosis and treatment of Lyme disease.

Lyme disease is a bacterial infection transmitted primarily by ticks and is caused by the spirochete *Borrelia burgdorferi*. Lyme disease and other tick-borne diseases and disorders, such as babesiosis, bartonella and ehrlichiosis, pose a serious threat to the quality of life of many Pennsylvanians, with the frequency of diagnosed and reported Lyme disease cases increasing dramatically over the past several years.

In 2008, 35,198 cases of Lyme disease were reported to the Centers for Disease Control and Prevention (CDC) in the United States. According to CDC epidemiologists, these reported cases are underestimated 6- to 12-fold, due to inherent flaws in its passive reporting system. From 2006 to 2008 the total reported cases of Lyme disease in the U.S. increased 77%. The number of reported cases in Pennsylvania for that same time period increased over 17%. Pennsylvania ranked third behind New York and Massachusetts with 3,818 reported cases of Lyme disease in 2008. As of September of this year, 5,660 cases of Lyme disease have been reported in Pennsylvania. To date, this represents a 48% increase over 2008. The following web address will provide you with a history of Lyme disease cases reported to the CDC from 1980 to present:

<http://www.lyme.org/resources/1980-cumulative.htm>

This legislation is supported by the Lyme Disease Association of Southeastern Pennsylvania, the Montgomery County (PA) Lyme Disease Information and Support Group, LymeAction PA, the York Lyme Disease Support Group, the PA Farm Bureau (Chester and Delaware county divisions), the Montgomery County Farm Bureau, the Lyme Disease Society, the Bucks County Lyme Disease Support Group, the Lower Bucks County Lyme Disease Support Group, the Lehigh Valley Support Group, the Pennsylvania Lyme Disease Awareness Committee and the NY/Penn Support Group. This measure is similar to Senate Bill 722 of the 2007-08 legislative session.

If you would like to cosponsor this legislation, please contact Pat Snively of my office by calling (717) 787-6599 or e-mailing her at psnively@pasen.gov.