

MEMO



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Senate of Pennsylvania

December 20, 2010

TO: ALL SENATORS

FROM: Stewart J. Greenleaf

Stewart

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

I am reintroducing **Senate Bill 1199**, 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 and other medical professionals provide patients with sufficient information about all diagnostic and treatment approaches, protecting the patient's right to an informed choice; (2) Physicians, nurse practitioners, insurers, patients and governmental agencies are educated that multiple diagnostic and treatment approaches exist; (3) Insurance reimbursement be provided for treatment rendered in accordance with the standard of care chosen; (4) Physicians have the right to exercise their clinical judgment in diagnosing and treating their patients (as recommended by the CDC's guidelines to diagnosing Lyme disease), and in applying short-term or long-term antibiotic therapies for therapeutic purpose; and (5) State government agencies provide unbiased information regarding multiple standards of care and the state of the science in these emerging diseases.

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 a recognized 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 more flexibility in applying the physician's clinical judgment and providing for longer term antibiotic therapies for persistent and chronic Lyme disease not cured by short-term protocols. 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 material 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 with longer term therapies as used in other diseases such as TB and Mycoplasma 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 enacted in 2009 in the states of Connecticut and Massachusetts to protect physicians from such actions, and also to diffuse the "chilling effect" such sanctions have had on physicians in the 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 2009, 38,468 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 2009, the total reported cases of Lyme disease in the U.S. increased by 93% and in Pennsylvania by 76%, continuing a significant trend of increasing incidence across the country. As of 2009, Pennsylvania ranks #1 in the U.S. in reported cases of Lyme disease.

This legislation is supported by the Pennsylvania Association of School Nurses and Practitioners, 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, the NY/Penn Support Group, The Bradford County LD Support Group, the Pittsburgh LD Support Group, the Endless Mountains LD Support Group, PALS (Harrisburg), Lehigh Valley SG, the Easton LD Support Group, the Williamsport Area LD Coalition, the Northwest/Erie LD Coalition, and the Shippensburg Area Lyme Group.

During the 2009-10 legislative session, the Senate Banking and Insurance Committee held a public hearing on the bill. The following link will allow you to access the audio and video of this hearing: <http://senatordonwhite.com/banking/2010/062210/agenda.htm>.

If you would like to cosponsor this legislation, please contact Pat Snively of my office by e-mailing her at psnively@pasen.gov.