## THE GENERAL ASSEMBLY OF PENNSYLVANIA

## **HOUSE BILL**

No. 272 Session of 2011

INTRODUCED BY HESS, BAKER, FLECK, MAJOR, CALTAGIRONE, CARROLL, CAUSER, COHEN, D. COSTA, J. EVANS, GOODMAN, GROVE, HARKINS, HARRIS, KAUFFMAN, M. K. KELLER, KIRKLAND, KORTZ, KOTIK, KULA, MAHONEY, MILLARD, PEIFER, PICKETT, RAPP, SWANGER, TALLMAN, YOUNGBLOOD, MOUL, BENNINGHOFF, MURT, KAVULICH, DENLINGER, BRADFORD, TRUITT, BRIGGS, MILLER, SCAVELLO, WATSON, GABLER, KILLION, FREEMAN, M. SMITH, HORNAMAN, HENNESSEY, R. BROWN, BEAR, PAYNE, CONKLIN, STEVENSON, PERRY, MAHER, ROCK, SAYLOR, HARPER AND BROOKS, JANUARY 27, 2011

AS AMENDED ON SECOND CONSIDERATION, HOUSE OF REPRESENTATIVES, OCTOBER 1, 2012

## AN ACT

Establishing a task force on Lyme disease and related maladies; and providing for powers and duties of the task force, the 2 Department of Health, the Department of Conservation and 3 Natural Resources and the Pennsylvania Game Commission and 5 for required coverage; AND EXECUTING PREVENTION AND EDUCATION STRATEGIES. 6 7 The General Assembly of the Commonwealth of Pennsylvania 8 hereby enacts as follows: Section 1. Short title. 10 This act shall be known and may be cited as the Lyme and 11 Related Tick Borne Disease Surveillance, Education, Prevention 12 and Treatment Act. 13 Section 2. Findings. 14 The General Assembly finds and declares as follows: 15 (1) Lyme disease and other tick borne diseases are 16 carried primarily by ticks and pose a serious threat to the

quality of life of many citizens of this Commonwealth.

(2) The most common way to acquire Lyme disease is to be bitten by a tick that carries the spirochete.

- (3) The Centers for Disease Control and Prevention (CDC) report that since 2001, Pennsylvania has ranked among the top-three states in the nation with the number of reported cases of Lyme disease.
- (4) In 2009, 4,950 confirmed cases of Lyme disease were reported in this Commonwealth, making Pennsylvania the highest in the nation with reported cases of Lyme disease.
- (5) Lyme disease is most prevalent in southeastern
  Pennsylvania, but it is found across this Commonwealth.
- (6) With proper precautions taken while engaged in outdoor activities, people can greatly reduce their chances of tick pathogen transmission by making sure that frequent tick checks are made and ticks are removed and disposed of promptly and properly.
- (7) The early clinical diagnosis and appropriate treatment of these tick borne disorders and diseases can greatly reduce the risks of continued, diverse and chronic signs and symptoms which can affect every system and organ of the human body and often every aspect of life.
- (8) Left untreated, Lyme disease can cause a number of signs and symptoms which can become quite severe.
- 25 (9) Because the rate of progress of the disease and
  26 differing individual responses to treatment, some patients
  27 may have signs and symptoms that linger for months or even
  28 years following treatment.
- 29 Section 3. Definitions.
- 30 The following words and phrases when used in this act shall

- 1 have the meanings given to them in this section unless the
- 2 context clearly indicates otherwise:
- 3 "Board." The Pennsylvania State Board of Medicine, the State
- 4 Board of Osteopathic Medicine and the State Board of Nursing.
- 5 "Department." The Department of Health of the Commonwealth.
- 6 "Licensee." A licensed physician or certified registered
- 7 nurse practitioner.
- 8 "Long term antibiotic or antimicrobial therapy."
- 9 Administration of oral, intramuscular or intravenous antibiotics
- 10 or antimicrobial medications, singly or in combination, for-
- 11 periods of more than four weeks.
- 12 "Lyme disease." The clinical diagnosis of a patient by a
- 13 licensed physician or certified registered nurse practitioner of
- 14 the presence of signs or symptoms compatible with acute, late-
- 15 stage, persistent or chronic infection with Borrelia burgdorferi-
- 16 or complications related to such infection or with such other
- 17 strains of Borrelia that are recognized by the Centers for-
- 18 Disease Control and Prevention as a cause of Lyme disease. The
- 19 term includes infection which meets the surveillance criteria
- 20 set forth by the Centers for Disease Control and Prevention and
- 21 also includes other acute and chronic manifestations of such an
- 22 infection as determined by a physician.
- 23 "Other health impairment." As defined by the Individuals—
- 24 with Disabilities Education Act (Public Law 91-230, 20 U.S.C. §
- 25 <del>1400 et seq.).</del>
- 26 "Related tick borne illnesses." Cases of Bartonellosis,
- 27 Babesiosis/Piroplasmosis, Anaplasmosis, Ehrlichiosis and other
- 28 tick-transmissible illnesses as may be empirically associated
- 29 with Lyme disease.
- 30 "Surveillance case definitions." The Case Definitions for

- 1 Public Health Surveillance, published by the Centers for Disease
- 2 Control and Prevention, which provide uniform criteria for
- 3 reporting cases to increase the specificity of reporting and
- 4 improving the comparability of diseases reported from different-
- 5 geographic areas. As further noted by the CDC, surveillance case-
- 6 definitions establish uniform criteria for disease reporting and
- 7 should not be used as the sole criteria for establishing
- 8 clinical diagnoses, determining the standard of care necessary
- 9 for a particular patient, setting guidelines for quality
- 10 assurance or providing standards for reimbursement.
- 11 "Therapeutic purpose." The use of antibiotics to control a
- 12 patient's symptoms or signs determined by a physician as
- 13 reasonably related to Lyme disease and its sequelae or related
- 14 tick-borne illnesses.
- 15 Section 4. Task force.
- 16 (a) Establishment. The department shall establish, to the
- 17 extent funds are appropriated specifically for the purposes of
- 18 this act, a task force on Lyme disease and related tick borne
- 19 <del>diseases.</del>
- 20 (a.1) Funding. The department shall identify and apply for
- 21 public and private grants and funding in order to carry out the-
- 22 requirements of this act to establish the task force.
- 23 (b) Purpose. The task force shall investigate and make-
- 24 recommendations to the department regarding:
- 25 (1) The surveillance and prevention of Lyme disease and
- 26 associated tick borne diseases in this Commonwealth.
- 27 (2) Raising awareness about the long term effects of the
- 28 <u>misdiagnosis of Lyme disease.</u>
- 29 (3) The development of a program of general public and
- 30 health care professional information and education regarding

1	Lyme disease which shall include the broad spectrum of
2	scientific and treatment views regarding Lyme disease and
3	related tick borne illnesses, including evidence based,
4	multiple standards of care and their respective evidence
5	bases for all stages of Lyme disease and related tick borne
6	<del>illnesses.</del>
7	(4) Cooperation with the Pennsylvania Game Commission to
8	disseminate the information required under paragraph (3) to
9	licensees of the commission and the general public.
10	(5) Cooperation with the Department of Conservation and
11	Natural Resources to disseminate the information required
12	under paragraph (3) to the general public and visitors of
13	State parks and lands.
14	(6) Cooperation with the Department of Environmental
15	Protection to test ticks for Lyme disease and other tick-
16	borne infections and provide results, including infection
17	rates across this Commonwealth, on their public Internet
18	website.
19	(7) Cooperation with the Department of Education to:
20	(i) Disseminate the information required under-
21	paragraph (3) to school administrators, faculty, staff,
22	parents, guardians and students.
23	(ii) Determine the role schools may play in the
24	prevention of Lyme disease, including, but not limited
25	to, prompt removal and reporting of tick removals to-
26	State officials.
27	(iii) Review and update policies to recognize
28	chronic Lyme disease and related tick borne illnesses as
29	"other health impairment."
30	(c) Composition. The task force shall be composed of the

1	following individuals:
2	(1) The Secretary of Health or a designee.
3	(2) The Insurance Commissioner or a designee.
4	(3) The Secretary of Education or a designee.
5	(4) The Deputy Secretary for Conservation and
6	Engineering Services in the Department of Conservation and
7	Natural Resources or a designee.
8	(5) The Director of the Bureau of Information and
9	Education of the Pennsylvania Game Commission or a designee.
10	(6) Two physicians, with at least one licensed in this
11	Commonwealth, who are knowledgeable concerning treatment of
12	early, late stage and chronic/persistent Lyme disease and who
13	are members of the International Lyme and Associated Diseases
14	Society.
15	(7) One physician licensed in this Commonwealth who is
16	knowledgeable concerning treatment of early, late-stage and
17	chronic/persistent Lyme disease and who specializes in
18	infectious diseases.
19	(8) One physician licensed in this Commonwealth who is
20	knowledgeable concerning treatment of early, late-stage and
21	chronic/persistent Lyme disease and who specializes in
22	neurology.
23	(9) An epidemiologist licensed in this Commonwealth
24	having expertise in spirochetes and related infectious
25	<del>diseases.</del>
26	(10) Two individuals representing Lyme disease support
27	<del>groups.</del>
28	(11) One individual who is a Lyme disease patient or a
29	family member of a patient.
30	(12) Two registered nurses licensed in this

- Commonwealth, one of which should be a certified registered
  nurse practitioner.
- 3 (13) The Director of Vector Management of the Department
  4 of Environmental Protection.
- 5 (14) An entomologist who has experience in tick
  6 identification and tick borne diseases.
- 7 (15) Two practitioners of veterinary medicine with at
  8 least one licensed in this Commonwealth with experience in
  9 tick borne diseases.
- 10 <del>(d) Convening.—</del>

15

- 11 (1) Within 45 days of the effective date of this act,
  12 the Secretary of Health shall appoint the members of the task
  13 force. The Secretary of Health shall appoint a chairman of
  14 the task force.
  - (2) The task force shall convene within 90 days of the effective date of this act and shall meet quarterly.
- 17 (3) The task force shall issue a report with

  18 recommendations to the Secretary of Health within one year of

  19 its first meeting. The report shall also be transmitted to

  20 the relevant committees of the House of Representatives.

  21 Nothing in this act shall prohibit the task force from making

  22 interim reports, taking agreed upon immediate actions or

  23 responding to requests for such reports.
- 24 (e) Compensation and expenses. The members of the task
- 25 force shall receive no compensation for their services but shall-
- 26 be reimbursed for actual and necessary expenses incurred in-
- 27 performance of their duties. Reimbursement shall be provided by
- 28 the department.
- 29 (f) Department.—The department shall, to the extent funds
  30 are appropriated specifically for the purposes of this act, have

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- (1) Develop a program of general public, health care professional and governmental agency information and education regarding Lyme disease which shall include the broad spectrum of scientific and treating views regarding.

  Lyme disease and related tick borne illnesses, including multiple standards of care available for all stages of Lyme disease and related tick borne illnesses.
- (2) Develop an intensive program, including active population based surveillance, active tick surveillance and sentinel (nonhuman) data to provide a better understanding of diseases, geographic hot spots and infectivity to be used intargeting prevention and education efforts.
- (3) Cooperate with the Pennsylvania Game Commission to disseminate the information required under paragraph (1) to licensees of the Pennsylvania Game Commission and the general public.
- (4) Cooperate with the Department of Conservation and
  Natural Resources to disseminate the information required
  under paragraph (1) to the general public and visitors of
  State parks and lands.
- (5) Cooperate with the professional associations of health care professionals to provide the education program for professionals required under paragraph (1).
- (6) Cooperate with the Department of Education to:
- (i) Disseminate the information under paragraph (1) to school administrators, school nurses, faculty and staff, parents, guardians and students.
- 29 (ii) Determine what role schools may play in the
  30 prevention of Lyme disease, including, but not limited

1	to, prompt removal and reporting of tick removals to
2	parents, guardians and State officials.
3	(iii) Review and update policies to recognize
4	chronic Lyme disease and related tick borne illnesses as-
5	"other health impairment" potentially requiring-
6	accommodations.
7	Section 5. Required coverage.
8	(a) Tick borne illnesses. Except as provided in subsection
9	(b), every health care policy which is delivered, issued for
10	delivery, renewed, extended or modified in this Commonwealth by
11	a health insurer must cover prescribed treatment for Lyme-
12	disease or related tick borne illnesses if the diagnosis and
13	treatment plan are documented in the patient's medical record,
14	and it is documented in the patient's medical record that the
15	patient has been properly informed of multiple standards of
16	care, risks and benefits and able to exercise informed consent.
17	Such treatment plans may include long term therapies, long term-
18	antibiotic or antimicrobial therapy and treatment as prescribed
19	by the patient's attending physician.
20	(b) Exception. Subsection (a) shall not apply to any of the
21	following types of insurance:
22	(1) Hospital indemnity.
23	(2) Accident.
24	(3) Specified disease.
25	(4) Disability income.
26	<del>(5) Dental.</del>
27	<del>(6) Vision.</del>
28	(7) Civilian Health and Medical Program of the Uniformed
29	Services (CHAMPUS) supplement.
30	(8) Medicare supplement.

- 1 (9) Long-term care.
- 2 (10) Other limited insurance benefit plans.
- 3 Section 20. Effective date.
- 4 This act shall take effect immediately.
- 5 SECTION 1. SHORT TITLE.
- 6 THIS ACT SHALL BE KNOWN AND MAY BE CITED AS THE LYME AND
- 7 RELATED TICK-BORNE DISEASE SURVEILLANCE, EDUCATION, PREVENTION
- 8 AND TREATMENT ACT.
- 9 SECTION 2. FINDINGS.
- 10 THE GENERAL ASSEMBLY FINDS AND DECLARES AS FOLLOWS:
- 11 (1) LYME DISEASE AND OTHER TICK-BORNE DISEASES ARE
- 12 CARRIED PRIMARILY BY TICKS AND POSE A SERIOUS THREAT TO THE
- 13 HEALTH AND QUALITY OF LIFE OF MANY CITIZENS OF THIS
- 14 COMMONWEALTH.
- 15 (2) THE MOST COMMON WAY TO ACQUIRE LYME DISEASE IS TO BE
- 16 BITTEN BY A TICK THAT CARRIES THE SPIROCHETE.
- 17 (3) IN 2009, 5,722 CONFIRMED CASES OF LYME DISEASE WERE
- 18 REPORTED IN THIS COMMONWEALTH, THE HIGHEST NUMBER OF CASES
- 19 REPORTED IN ANY STATE AND REPRESENTING A 76% INCREASE SINCE
- 20 2006. IN 2011, PROVISIONAL NUMBERS OF 7,484 CASES CONFIRM
- 21 THIS ONGOING UPWARD TREND.
- 22 (4) THESE TRENDS ILLUSTRATE THE WORLD HEALTH
- 23 ORGANIZATION'S (WHO) PROJECTIONS THROUGH 2010. THE WHO STATES
- 24 THAT LYME DISEASE WILL INCREASINGLY BECOME A PUBLIC HEALTH
- 25 THREAT IN THE UNITED STATES. PENNSYLVANIA NEEDS TO BE
- 26 PREPARED TO DEAL WITH THIS TREND, WHICH IS ALREADY BEING
- OBSERVED IN PENNSYLVANIA'S STATISTICS.
- 28 (5) LYME DISEASE IS MOST PREVALENT IN SOUTHEASTERN
- 29 PENNSYLVANIA, BUT IT IS FOUND ACROSS THIS COMMONWEALTH.
- 30 (6) WITH PROPER PRECAUTIONS TAKEN WHILE ENGAGED IN

- 1 OUTDOOR ACTIVITIES, PEOPLE CAN GREATLY REDUCE THEIR CHANCES
- 2 OF TICK PATHOGEN TRANSMISSION BY MAKING SURE THAT FREQUENT
- 3 TICK CHECKS ARE MADE AND TICKS ARE REMOVED AND DISPOSED OF
- 4 PROMPTLY AND PROPERLY.
- 5 (7) THE EARLY CLINICAL DIAGNOSIS AND APPROPRIATE
- 6 TREATMENT OF THESE TICK-BORNE DISORDERS AND DISEASES CAN
- 7 GREATLY REDUCE THE RISKS OF CONTINUED SYMPTOMS WHICH CAN
- 8 AFFECT EVERY SYSTEM AND ORGAN OF THE HUMAN BODY AND OFTEN
- 9 EVERY ASPECT OF LIFE.
- 10 (8) LEFT UNTREATED, LYME DISEASE CAN CAUSE A NUMBER OF
- 11 SIGNS AND SYMPTOMS WHICH CAN BECOME QUITE SEVERE.
- 12 SECTION 3. LEGISLATIVE INTENT.
- 13 IT IS THE INTENT OF THE GENERAL ASSEMBLY:
- 14 (1) TO PROVIDE THE PUBLIC WITH INFORMATION AND EDUCATION
- 15 TO CREATE GREATER PUBLIC AWARENESS OF THE DANGERS OF AND
- 16 MEASURES AVAILABLE TO PREVENT, DIAGNOSE AND TREAT LYME
- 17 DISEASE AND RELATED MALADIES.
- 18 (2) TO ENSURE THAT:
- 19 (I) LICENSEES, INSURERS, PATIENTS AND GOVERNMENTAL
- 20 AGENCIES ARE EDUCATED ABOUT TREATMENT OPTIONS.
- 21 (II) LICENSEES PROVIDE PATIENTS WITH SUFFICIENT
- 22 INFORMATION ABOUT TREATMENT OPTIONS TO ENABLE PATIENTS TO
- 23 MAKE AN INFORMED CHOICE AS PART OF INFORMED CONSENT AND
- 24 RESPECT THE AUTONOMY OF THAT CHOICE.
- 25 (III) PENNSYLVANIA GOVERNMENT AGENCIES PROVIDE
- 26 UNBIASED INFORMATION REGARDING TREATMENT OPTIONS.
- 27 SECTION 4. DEFINITIONS.
- 28 THE FOLLOWING WORDS AND PHRASES WHEN USED IN THIS ACT SHALL
- 29 HAVE THE MEANINGS GIVEN TO THEM IN THIS SECTION UNLESS THE
- 30 CONTEXT CLEARLY INDICATES OTHERWISE:

- 1 "BOARD." THE PENNSYLVANIA STATE BOARD OF MEDICINE, THE STATE
- 2 BOARD OF OSTEOPATHIC MEDICINE AND THE STATE BOARD OF NURSING.
- 3 "DEPARTMENT." THE DEPARTMENT OF HEALTH OF THE COMMONWEALTH.
- 4 "LICENSEE." A LICENSED PHYSICIAN, A PHYSICIAN'S ASSISTANT OR
- 5 CERTIFIED REGISTERED NURSE PRACTITIONER OR OTHER LICENSED HEALTH
- 6 CARE PROFESSIONAL.
- 7 "LONG-TERM ANTIBIOTIC OR ANTIMICROBIAL THERAPY."
- 8 ADMINISTRATION OF ORAL, INTRAMUSCULAR OR INTRAVENOUS ANTIBIOTICS
- 9 OR ANTIMICROBIAL MEDICATIONS, SINGLY OR IN COMBINATION, FOR
- 10 PERIODS OF MORE THAN FOUR WEEKS.
- 11 "LYME DISEASE." THE CLINICAL DIAGNOSIS OF A PATIENT BY A
- 12 LICENSED PHYSICIAN OR CERTIFIED REGISTERED NURSE PRACTITIONER OF
- 13 THE PRESENCE OF SIGNS OR SYMPTOMS COMPATIBLE WITH ACUTE, LATE-
- 14 STAGE, PERSISTENT INFECTION WITH BORRELIA BURGDORFERI OR
- 15 COMPLICATIONS RELATED TO SUCH INFECTION OR WITH SUCH OTHER
- 16 STRAINS OF BORRELIA THAT ARE RECOGNIZED BY THE CENTERS FOR
- 17 DISEASE CONTROL AND PREVENTION AS A CAUSE OF LYME DISEASE. THE
- 18 TERM INCLUDES INFECTION WHICH MEETS THE SURVEILLANCE CRITERIA
- 19 SET FORTH BY THE CENTERS FOR DISEASE CONTROL AND PREVENTION AND
- 20 OTHER ACUTE AND PERSISTENT MANIFESTATIONS OF SUCH AN INFECTION
- 21 AS DETERMINED BY A PHYSICIAN.
- "RELATED TICK-BORNE ILLNESSES." CASES OF BARTONELLOSIS,
- 23 BABESIOSIS/PIROPLASMOSIS, ANAPLASMOSIS, EHRLICHIOSIS AND OTHER
- 24 TICK-TRANSMISSIBLE ILLNESSES AS MAY BE EMPIRICALLY ASSOCIATED
- 25 WITH LYME DISEASE.
- 26 "SECRETARY." THE SECRETARY OF HEALTH OF THE COMMONWEALTH.
- 27 "STATE OFFICIALS." THE TERM INCLUDES THE SECRETARY OF
- 28 ENVIRONMENTAL PROTECTION.
- 29 "TASK FORCE." THE TASK FORCE ESTABLISHED BY THIS ACT.
- 30 "THERAPEUTIC PURPOSE." THE USE OF ANTIBIOTICS TO CONTROL A

- 1 PATIENT'S SYMPTOMS OR SIGNS DETERMINED BY A PHYSICIAN AS
- 2 REASONABLY RELATED TO LYME DISEASE AND ITS SEQUELAE OR RELATED
- 3 TICK-BORNE ILLNESSES.
- 4 SECTION 5. TASK FORCE.
- 5 (A) ESTABLISHMENT.--THE DEPARTMENT SHALL ESTABLISH A TASK
- 6 FORCE ON LYME DISEASE AND RELATED TICK-BORNE DISEASES.
- 7 (B) PURPOSE.--THE TASK FORCE SHALL INVESTIGATE AND MAKE
- 8 RECOMMENDATIONS TO THE DEPARTMENT REGARDING:
- 9 (1) THE SURVEILLANCE AND PREVENTION OF LYME DISEASE AND
- 10 RELATED TICK-BORNE ILLNESSES IN THIS COMMONWEALTH.
- 11 (2) RAISING AWARENESS ABOUT THE LONG-TERM EFFECTS OF THE
- 12 MISDIAGNOSIS OF LYME DISEASE.
- 13 (3) THE DEVELOPMENT OF A PROGRAM OF GENERAL PUBLIC AND
- 14 HEALTH CARE PROFESSIONAL INFORMATION AND EDUCATION REGARDING
- 15 LYME DISEASE WHICH SHALL INCLUDE THE BROAD SPECTRUM OF
- 16 SCIENTIFIC AND TREATMENT OPTIONS REGARDING ALL STAGES OF LYME
- 17 DISEASE AND RELATED TICK-BORNE ILLNESSES.
- 18 (4) COOPERATION WITH THE PENNSYLVANIA GAME COMMISSION TO
- 19 DISSEMINATE THE INFORMATION REQUIRED UNDER PARAGRAPH (3) TO
- 20 LICENSEES OF THE COMMISSION AND THE GENERAL PUBLIC.
- 21 (5) COOPERATION WITH THE DEPARTMENT OF CONSERVATION AND
- 22 NATURAL RESOURCES TO DISSEMINATE THE INFORMATION REQUIRED
- 23 UNDER PARAGRAPH (3) TO THE GENERAL PUBLIC AND VISITORS OF
- 24 STATE PARKS AND LANDS.
- 25 (6) COOPERATION WITH THE DEPARTMENT OF ENVIRONMENTAL
- 26 PROTECTION TO TEST TICKS AND PROVIDE RESULTS AND TO PUBLISH
- ON ITS PUBLICLY ACCESSIBLE INTERNET WEBSITE.
- 28 (7) COOPERATION WITH THE DEPARTMENT OF EDUCATION TO:
- 29 (I) DISSEMINATE THE INFORMATION REQUIRED UNDER
- 30 PARAGRAPH (3) TO SCHOOL ADMINISTRATORS, FACULTY, STAFF,

- 1 PARENTS, GUARDIANS AND STUDENTS.
- 2 (II) DETERMINE THE ROLE SCHOOLS MAY PLAY IN THE
- 3 PREVENTION OF LYME DISEASE, INCLUDING, BUT NOT LIMITED
- 4 TO, PROMPT REMOVAL AND REPORTING OF TICK REMOVALS TO
- 5 STATE OFFICIALS.
- 6 (III) UPDATE POLICIES TO RECOGNIZE SIGNS OR SYMPTOMS
- 7 OF LYME DISEASE AND RELATED TICK-BORNE ILLNESSES AS
- 8 HEALTH IMPAIRMENTS POTENTIALLY REQUIRING ACCOMMODATIONS.
- 9 (C) COMPOSITION. -- THE TASK FORCE SHALL BE COMPOSED OF THE
- 10 FOLLOWING INDIVIDUALS:
- 11 (1) THE SECRETARY OF HEALTH OR A DESIGNEE.
- 12 (2) THE INSURANCE COMMISSIONER OR A DESIGNEE.
- 13 (3) THE SECRETARY OF EDUCATION OR A DESIGNEE.
- 14 (4) THE DEPUTY SECRETARY FOR PARKS AND FORESTRY IN THE
- 15 DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES OR A
- 16 DESIGNEE.
- 17 (5) THE DIRECTOR OF THE BUREAU OF INFORMATION AND
- 18 EDUCATION OF THE PENNSYLVANIA GAME COMMISSION OR A DESIGNEE.
- 19 (6) TWO PHYSICIANS LICENSED IN THIS COMMONWEALTH, WHO
- 20 ARE KNOWLEDGEABLE CONCERNING TREATMENT OF LYME DISEASE AND
- 21 RELATED TICK-BORNE ILLNESSES AND WHO ARE MEMBERS OF THE
- 22 INTERNATIONAL LYME AND ASSOCIATED DISEASES SOCIETY.
- 23 (7) TWO PHYSICIANS LICENSED IN THIS COMMONWEALTH WHO ARE
- 24 KNOWLEDGEABLE CONCERNING TREATMENT OF LYME DISEASE AND
- 25 RELATED TICK-BORNE ILLNESSES WHO ARE MEMBERS OF THE
- 26 INFECTIOUS DISEASE SOCIETY OF AMERICA.
- 27 (8) AN EPIDEMIOLOGIST LICENSED IN THIS COMMONWEALTH
- 28 HAVING EXPERTISE IN SPIROCHETES AND RELATED INFECTIOUS
- 29 DISEASES.
- 30 (9) TWO INDIVIDUALS REPRESENTING LYME DISEASE PATIENT

- 1 GROUPS WHO MAY BE A LYME DISEASE PATIENT OF A FAMILY MEMBER
- 2 OF A LYME DISEASE PATIENT.
- 3 (10) ONE INDIVIDUAL WHO IS A LYME DISEASE PATIENT OR A
- 4 FAMILY MEMBER OF A LYME DISEASE PATIENT.
- 5 (11) TWO REGISTERED NURSES LICENSED IN THIS
- 6 COMMONWEALTH, ONE OF WHICH SHOULD BE A CERTIFIED REGISTERED
- 7 NURSE PRACTITIONER AND BOTH OF WHOM ARE KNOWLEDGEABLE
- 8 CONCERNING LYME DISEASE AND RELATED TICK-BORNE ILLNESSES.
- 9 (12) THE DIRECTOR OF VECTOR MANAGEMENT OF THE DEPARTMENT
- 10 OF ENVIRONMENTAL PROTECTION.
- 11 (13) AN ENTOMOLOGIST WITH THE DEPARTMENT OF ENTOMOLOGY
- 12 OF THE PENNSYLVANIA STATE UNIVERSITY WHO HAS EXPERIENCE IN
- 13 TICK IDENTIFICATION AND TICK-BORNE DISEASES.
- 14 (14) A REGISTERED SCHOOL NURSE LICENSED IN THIS
- 15 COMMONWEALTH WHO IS KNOWLEDGEABLE CONCERNING LYME DISEASE AND
- 16 TICK-BORNE ILLNESSES.
- 17 (15) TWO VETERINARIANS LICENSED IN THIS COMMONWEALTH, AT
- 18 LEAST ONE OF WHOM IS A VETERINARY EPIDEMIOLOGIST AND BOTH OF
- 19 WHOM ARE KNOWLEDGEABLE CONCERNING LYME DISEASE AND RELATED
- 20 TICK-BORNE ILLNESSES.
- 21 (D) MEETINGS.--
- 22 (1) WITHIN 45 DAYS OF THE EFFECTIVE DATE OF THIS ACT,
- 23 THE SECRETARY OF HEALTH SHALL APPOINT THE MEMBERS OF THE TASK
- 24 FORCE. THE SECRETARY OF HEALTH SHALL APPOINT A CHAIRMAN OF
- THE TASK FORCE.
- 26 (2) THE TASK FORCE SHALL CONVENE WITHIN 90 DAYS OF THE
- 27 EFFECTIVE DATE OF THIS ACT AND SHALL MEET QUARTERLY.
- 28 (3) THE TASK FORCE SHALL ISSUE A REPORT WITH
- 29 RECOMMENDATIONS TO THE SECRETARY OF HEALTH WITHIN ONE YEAR OF
- 30 ITS FIRST MEETING. THE REPORT SHALL ALSO BE TRANSMITTED TO

- 1 THE RELEVANT COMMITTEES OF THE SENATE AND THE HOUSE OF
- 2 REPRESENTATIVES. NOTHING IN THIS ACT SHALL PROHIBIT THE TASK
- FORCE FROM MAKING INTERIM REPORTS, TAKING AGREED-UPON
- 4 IMMEDIATE ACTIONS OR RESPONDING TO REQUESTS FOR SUCH REPORTS.
- 5 (E) COMPENSATION AND EXPENSES. -- THE MEMBERS OF THE TASK
- 6 FORCE SHALL RECEIVE NO COMPENSATION FOR THEIR SERVICES BUT SHALL
- 7 BE REIMBURSED FOR ACTUAL AND NECESSARY EXPENSES INCURRED IN
- 8 PERFORMANCE OF THEIR DUTIES. REIMBURSEMENT SHALL BE PROVIDED BY
- 9 THE DEPARTMENT.
- 10 (F) DEPARTMENT.--THE DEPARTMENT SHALL:
- 11 (1) DEVELOP A PROGRAM OF GENERAL PUBLIC AND HEALTH CARE
- 12 PROFESSIONAL INFORMATION AND EDUCATION REGARDING LYME DISEASE
- 13 WHICH SHALL INCLUDE THE BROAD SPECTRUM OF SCIENTIFIC AND
- 14 TREATING OPTIONS REGARDING ALL STAGES OF LYME DISEASE AND
- 15 RELATED TICK-BORNE ILLNESSES.
- 16 (2) DEVELOP AN ACTIVE TICK COLLECTION, TESTING AND
- 17 SURVEILLANCE PROGRAM IN COOPERATION WITH THE DEPARTMENT OF
- 18 ENVIRONMENTAL PROTECTION TO PROVIDE A BETTER UNDERSTANDING
- 19 OF, INCLUDING, BUT NOT LIMITED TO, THE FULL RANGE OF TICK-
- 20 BORNE DISEASES, GEOGRAPHIC HOT SPOTS AND LEVELS OF
- 21 INFECTIVITY TO BE USED IN TARGETING PREVENTION AND EDUCATION
- 22 EFFORTS. THIS EFFORT MAY INCLUDE VETERINARY DATA ON TICK-
- 23 BORNE DISEASE PREVENTION, SPECIFICALLY DOGS AND HORSES AND
- 24 OTHER ANIMALS AS THE CENTERS FOR DISEASE CONTROL AND
- 25 PREVENTION HAVE RECOMMENDED.
- 26 (3) COOPERATE WITH THE PENNSYLVANIA GAME COMMISSION TO
- 27 DISSEMINATE THE INFORMATION REQUIRED UNDER PARAGRAPH (1) TO
- 28 LICENSEES OF THE PENNSYLVANIA GAME COMMISSION AND THE GENERAL
- 29 PUBLIC.
- 30 (4) COOPERATE WITH THE DEPARTMENT OF CONSERVATION AND

- 1 NATURAL RESOURCES TO DISSEMINATE THE INFORMATION REQUIRED
- 2 UNDER PARAGRAPH (1) TO THE GENERAL PUBLIC AND VISITORS OF
- 3 STATE PARKS AND LANDS.

- 4 (5) COOPERATE WITH THE PROFESSIONAL ASSOCIATIONS OF
  5 HEALTH CARE PROFESSIONALS TO PROVIDE THE EDUCATION PROGRAM
  6 FOR PROFESSIONALS REQUIRED UNDER PARAGRAPH (1).
  - (6) COOPERATE WITH THE DEPARTMENT OF EDUCATION TO:
  - (I) DISSEMINATE THE INFORMATION UNDER PARAGRAPH (1)

    TO SCHOOL ADMINISTRATORS, SCHOOL NURSES, FACULTY AND

    STAFF, PARENTS, GUARDIANS AND STUDENTS.
    - (II) DETERMINE WHAT ROLE SCHOOLS MAY PLAY IN THE PREVENTION OF LYME DISEASE, INCLUDING, BUT NOT LIMITED TO, PROMPT REMOVAL AND REPORTING OF TICK REMOVALS TO STATE OFFICIALS.
  - (III) UPDATE POLICIES TO RECOGNIZE SIGNS OR SYMPTOMS

    OF LYME DISEASE AND RELATED TICK-BORNE ILLNESSES AS

    HEALTH CONDITIONS POTENTIALLY REQUIRING ACCOMMODATIONS.
    - (7) COOPERATE WITH THE DEPARTMENT OF ENVIRONMENTAL
      PROTECTION TO PUBLISH AND MAKE AVAILABLE ON ITS PUBLICLY
      ACCESSIBLE INTERNET WEBSITE THE INFORMATION DEVELOPED UNDER
      PARAGRAPH (2) TO HEALTH CARE PROFESSIONALS AND THE GENERAL
      PUBLIC.
    - (8) COOPERATE WITH THE PENNSYLVANIA STATE UNIVERSITY,
      DEPARTMENT OF ENTOMOLOGY, COOPERATIVE EXTENSION PROGRAM FOR
      INTEGRATED PEST MANAGEMENT, TO DISSEMINATE EDUCATIONAL
      RESOURCES ABOUT TICKS, RELATED DISEASES AND INTEGRATED PEST
      MANAGEMENT FOR DISEASE PREVENTION AS REQUIRED UNDER PARAGRAPH
      (1) TO HEALTH CARE PROFESSIONALS AND THE GENERAL PUBLIC.
- 29 (9) IDENTIFY AND APPLY FOR PUBLIC AND PRIVATE FUNDING IN
  30 ORDER TO CARRY OUT THE PROVISIONS OF THIS ACT.

- 1 SECTION 6. REQUIRED COVERAGE.
- 2 (A) TICK-BORNE ILLNESSES. -- EXCEPT AS PROVIDED IN SUBSECTION
- 3 (B), EVERY HEALTH CARE POLICY WHICH IS DELIVERED, ISSUED FOR
- 4 DELIVERY, RENEWED, EXTENDED OR MODIFIED IN THIS COMMONWEALTH BY
- 5 A HEALTH INSURER MUST COVER PRESCRIBED TREATMENT FOR LYME
- 6 DISEASE OR RELATED TICK-BORNE ILLNESSES IF THE DIAGNOSIS AND
- 7 TREATMENT PLAN ARE DOCUMENTED IN THE PATIENT'S MEDICAL RECORD,
- 8 AND IT IS DOCUMENTED IN THE PATIENT'S MEDICAL RECORD THAT THE
- 9 PATIENT HAS BEEN PROPERLY INFORMED OF MULTIPLE STANDARDS OF
- 10 CARE, RISKS AND BENEFITS AND ABLE TO EXERCISE INFORMED CONSENT.
- 11 SUCH TREATMENT PLANS MAY INCLUDE LONG-TERM THERAPIES, LONG-TERM
- 12 ANTIBIOTIC OR ANTIMICROBIAL THERAPY AND TREATMENT AS PRESCRIBED
- 13 BY THE PATIENT'S ATTENDING PHYSICIAN.
- 14 (B) EXCEPTION.--SUBSECTION (A) SHALL NOT APPLY TO ANY OF THE
- 15 FOLLOWING TYPES OF INSURANCE:
- 16 (1) HOSPITAL INDEMNITY.
- 17 (2) ACCIDENT.
- 18 (3) SPECIFIED DISEASE.
- 19 (4) DISABILITY INCOME.
- 20 (5) DENTAL.
- 21 (6) VISION.
- 22 (7) CIVILIAN HEALTH AND MEDICAL PROGRAM OF THE UNIFORMED
- 23 SERVICES (CHAMPUS) SUPPLEMENT.
- 24 (8) MEDICARE SUPPLEMENT.
- 25 (9) LONG-TERM CARE.
- 26 (10) OTHER LIMITED INSURANCE BENEFIT PLANS.
- 27 SECTION 7. EFFECTIVE DATE.
- THIS ACT SHALL TAKE EFFECT JULY 1, 2013.