SENATE BILL No. 166

DIGEST OF INTRODUCED BILL

Citations Affected: IC 5-10-8-21; IC 12-15-5-18; IC 16-18-2-214.8; IC 16-41-17.5; IC 27-8-35; IC 27-13-7-24.

Synopsis: Treatment of Lyme disease. Requires that, if an individual
is diagnosed with Lyme disease or a related tick borne disease, state
employee health plans, Medicaid, policies of accident and sickness
insurance, and health maintenance organization contracts must provide
coverage for Lyme disease or a related tick borne disease testing and
treatment that is prescribed by a health care provider. Provides that a
health care provider may not be subject to discipline solely because the
health care provider prescribed, administered, or dispensed a long term
antibiotic treatment for the treatment of Lyme disease or a tick borne
disease. Requires a health care provider or health care provider's
designee who orders a laboratory test for the presence of Lyme disease
to provide the patient or the patient's legal representative with certain
written information concerning Lyme disease.

Effective: July 1, 2019.
SENATE BILL No. 166

A BILL FOR AN ACT to amend the Indiana Code concerning health.

Be it enacted by the General Assembly of the State of Indiana:

SECTION 1. IC 5-10-8-21 is added to the Indiana Code as a new section to read as follows [effective July 1, 2019]: Sec. 21. (a) As used in this section, "covered individual" means an individual who is entitled to coverage under a state employee health plan.

(b) As used in this section, "health care provider" means an individual who is licensed as any of the following:

(1) A physician.

(2) A physician assistant.

(3) An advanced practice nurse.

(c) As used in this section, "Lyme disease" means an infection:

(1) commonly:

(A) transmitted by a tick; and

(B) caused by the Borrelia burgdorferi, Borrelia mayonii, Borrelia miyamotoi, Borrelia afzelii, or Borrelia garinii bacteria; or

(2) that meets the most recent federal Centers for Disease
Control and Prevention surveillance case definition for Lyme disease.

The term includes complications from Lyme disease.

(d) As used in this section, "state employee health plan" means one (1) of the following:

1. A self-insurance program established under section 7(b) of this chapter to provide group health coverage.
2. A contract with a prepaid health care delivery plan that is entered into or renewed under section 7(c) of this chapter.

(e) As used in this section, "tick borne disease" means a disease:

1. commonly transmitted by a tick; and
2. that results in symptoms compatible with any of the following diseases:
   1. Anaplasmosis.
   2. Babesiosis.
   4. Ehrlichiosis.
   5. Spotted fever, including Rocky Mountain spotted fever and rickettsioses.
   6. Any other disease, other than Lyme disease, that is recognized by the federal Centers for Disease Control and Prevention as a tick borne disease.

The term includes complications from a tick borne disease.

(f) If a covered individual is diagnosed with Lyme disease or a related tick borne disease, a state employee health plan must provide coverage for Lyme disease or a related tick borne disease testing and treatment that is prescribed by a health care provider. Covered treatments include short term or long term durations of antimicrobial treatments, including a long term antibiotic treatment classified as unproven, experimental, or investigational in nature for the treatment of Lyme disease or a tick borne disease.

(g) A health care provider may not be subject to discipline under IC 25-1-9 solely because the health care provider prescribed, administered, or dispensed a long term antibiotic treatment for the treatment of Lyme disease or a tick borne disease. The health care provider's diagnosis, treatment, and monitoring of the covered individual must be documented in the covered individual's medical record.

(h) This section applies to a state employee health plan that is issued, entered into, delivered, amended, or renewed after June 30, 2019.

SECTION 2. IC 12-15-5-18 IS ADDED TO THE INDIANA CODE
AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 18. (a) As used in this section, "Lyme disease" means an infection:

(1) commonly:
   (A) transmitted by a tick; and
   (B) caused by the Borrelia burgdorferi, Borrelia mayonii, Borrelia miyamotoi, Borrelia afzelii, or Borrelia garinii bacteria; or

(2) that meets the most recent federal Centers for Disease Control and Prevention surveillance case definition for Lyme disease.

The term includes complications from Lyme disease.

(b) As used in this section, "tick borne disease" means a disease:

(1) commonly transmitted by a tick; and

(2) that results in symptoms compatible with any of the following diseases:
   (A) Anaplasmosis.
   (B) Babesiosis.
   (C) Bartonella.
   (D) Ehrlichiosis.
   (E) Spotted fever, including Rocky Mountain spotted fever and rickettsioses.
   (F) Any other disease, other than Lyme disease, that is recognized by the federal Centers for Disease Control and Prevention as a tick borne disease.

The term includes complications from a tick borne disease.

(c) The Medicaid program must provide coverage for a Medicaid recipient who is diagnosed with Lyme disease or a related tick borne disease, including coverage for Lyme disease or a related tick borne disease testing and treatment that is prescribed by a Medicaid provider. Covered treatments include short term or long term durations of antimicrobial treatments, including a long term antibiotic treatment classified as unproven, experimental, or investigational in nature for the treatment of Lyme disease or a tick borne disease.

(d) A Medicaid provider may not be subject to discipline under IC 25-1-9 solely because the Medicaid provider prescribed, administered, or dispensed a long term antibiotic treatment for the treatment of Lyme disease or a tick borne disease. The Medicaid provider's diagnosis, treatment, and monitoring of the Medicaid recipient must be documented in the Medicaid recipient's medical record.
SECTION 3. IC 16-18-2-214.8 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 214.8. "Lyme disease", for purposes of IC 16-41-17.5, has the meaning set forth in IC 16-41-17.5-1.

SECTION 4. IC 16-41-17.5 IS ADDED TO THE INDIANA CODE AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]:

Chapter 17.5. Prevention and Treatment Programs: Lyme Disease Testing Information Disclosure

Sec. 1. As used in this chapter, "Lyme disease" means an infection:

(1) commonly:
   (A) transmitted by a tick; and
   (B) caused by the Borrelia burgdorferi, Borrelia mayonii, Borrelia miyamotoi, Borrelia afzelii, or Borrelia garinii bacteria; or
(2) that meets the most recent federal Centers for Disease Control and Prevention surveillance case definition for Lyme disease.

Sec. 2. A health care provider or health care provider's designee who orders a laboratory test for the presence of Lyme disease shall provide the patient or the patient's legal representative with the following written information:

Your health care provider has ordered a laboratory test for the presence of Lyme disease for you.

Current laboratory testing for Lyme disease can be problematic, and standard laboratory tests often result in false negative and false positive results.

If you have the disease but the test is performed too early, you may not have produced enough antibodies to be considered positive because your immune response requires time to develop antibodies.

The Centers for Disease Control (CDC) has stated that multiple tests are sometimes required to achieve an accurate test result.

If you are tested for Lyme disease and the results are negative, this does not necessarily mean you do not have Lyme disease.

If you continue to experience symptoms, you should contact your health care provider and inquire about the appropriateness of retesting or additional treatment.
SECTION 5. IC 27-8-35 IS ADDED TO THE INDIANA CODE AS
A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY
1, 2019]:

Chapter 35. Coverage for Lyme Disease and Tick Borne
Diseases
Sec. 1. As used in this chapter, "health care provider" means an
individual who is licensed as any of the following:
(1) A physician.
(2) A physician assistant.
(3) An advanced practice nurse.
Sec. 2. As used in this chapter, "insured" means an individual
who is entitled to coverage under a policy of accident and sickness
insurance.
Sec. 3. As used in this chapter, "Lyme disease" means an
infection:
(1) commonly:
   (A) transmitted by a tick; and
   (B) caused by the Borrelia burgdorferi, Borrelia mayonii,
       Borrelia miyamotoi, Borrelia afzelii, or Borrelia garinii
       bacteria; or
   (2) that meets the most recent federal Centers for Disease
       Control and Prevention surveillance case definition for Lyme
disease.
The term includes complications from Lyme disease.
Sec. 4. As used in this chapter, "policy of accident and sickness
insurance" has the meaning set forth in IC 27-8-5-1.
Sec. 5. As used in this chapter, "tick borne disease" means a
disease:
(1) commonly transmitted by a tick; and
(2) that results in symptoms compatible with any of the
following diseases:
   (A) Anaplasmosis.
   (B) Babesiosis.
   (C) Bartonella.
   (D) Ehrlichiosis.
   (E) Spotted fever, including Rocky Mountain spotted fever
       and rickettsioses.
   (F) Any other disease, other than Lyme disease, that is
       recognized by the federal Centers for Disease Control and
       Prevention as a tick borne disease.
Sec. 6. If an insured is diagnosed with Lyme disease or a related
tick borne disease, a policy of accident and sickness insurance must
provide coverage for Lyme disease or a related tick borne disease testing and treatment that is prescribed by a health care provider. Covered treatments include short term or long term durations of antimicrobial treatments, including a long term antibiotic treatment classified as unproven, experimental, or investigational in nature for the treatment of Lyme disease or a tick borne disease.

Sec. 7. A health care provider may not be subject to discipline under IC 25-1-9 solely because the health care provider prescribed, administered, or dispensed a long term antibiotic treatment for the treatment of Lyme disease or a tick borne disease. The health care provider's diagnosis, treatment, and monitoring of the insured must be documented in the insured's medical record.

Sec. 8. This chapter applies to a policy of accident and sickness insurance that is issued, delivered, amended, or renewed after June 30, 2019.

SECTION 6. IC 27-13-7-24 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]:

Sec. 24. (a) As used in this section, "health care provider" means an individual who is licensed as any of the following:

(1) A physician.
(2) A physician assistant.
(3) An advanced practice nurse.

(b) As used in this chapter, "Lyme disease" means an infection:

(1) commonly:

(A) transmitted by a tick; and
(B) caused by the Borrelia burgdorferi, Borrelia mayonii, Borrelia miyamotoi, Borrelia afzelii, or Borrelia garinii bacteria; or

(2) that meets the most recent federal Centers for Disease Control and Prevention surveillance case definition for Lyme disease.
The term includes complications from Lyme disease.

(c) As used in this section, "tick borne disease" means a disease:

(1) commonly transmitted by a tick; and
(2) that results in symptoms compatible with any of the following diseases:

(A) Anaplasmosis.
(B) Babesiosis.
(C) Bartonella.
(D) Ehrlichiosis.
(E) Spotted fever, including Rocky Mountain spotted fever and rickettsioses.
(F) Any other disease, other than Lyme disease, that is recognized by the federal Centers for Disease Control and Prevention as a tick borne disease. The term includes complications from a tick borne disease.

(d) If an enrollee is diagnosed with Lyme disease or a related tick borne disease, the health maintenance organization must provide coverage for Lyme disease or a related tick borne disease testing and treatment that is prescribed by a health care provider. Covered treatments include short term or long term durations of antimicrobial treatments, including a long term antibiotic treatment classified as unproven, experimental, or investigational in nature for the treatment of Lyme disease or a tick borne disease.

(e) A health care provider may not be subject to discipline under IC 25-1-9 solely because the health care provider prescribed, administered, or dispensed a long term antibiotic treatment for the treatment of Lyme disease or a tick borne disease. The health care provider's diagnosis, treatment, and monitoring of the enrollee must be documented in the enrollee's medical record.

(f) This section applies to an individual contract or a group contract that is entered into, delivered, amended, or renewed after June 30, 2019.