

Medical Coverage Policy | Lyme Disease Diagnosis and Treatment Mandate



EFFECTIVE DATE: 05|01|2005
POLICY LAST UPDATED: 03|01|2016

OVERVIEW

This policy documents the state-mandated coverage guidelines for certain Lyme disease treatments (Rhode Island General Law 27-20-48).

MEDICAL CRITERIA

Not applicable

PRIOR AUTHORIZATION

Prior authorization review is not required.

POLICY STATEMENT

BlueCHiP for Medicare and Commercial Products

In accordance with Rhode Island General Law § 27-20-48, coverage is provided for diagnostic testing and long-term antibiotic treatment of chronic Lyme disease.

To qualify for payment, services must be ordered by a physician after evaluation of symptoms, diagnostic test results, and response to treatment. Benefit payment for Lyme disease treatment will not be denied solely because such treatment may be characterized as unproven, experimental, or investigational.

As per the mandate, services must be ordered by a physician, not a Registered Nurse Practitioner or a Physician Assistant.

COVERAGE

Benefits may vary between groups/contracts. Please refer to the appropriate Benefit Booklet, Evidence of Coverage, or Subscriber Agreement for applicable benefits/coverage.

Although Rhode Island-mandated benefits generally do not apply to Plan 65, FEHBP, and BlueCHiP for Medicare, Blue Cross & Blue Shield of Rhode Island follows this mandate for all products. Self-funded groups may or may not choose to follow state mandates.

BACKGROUND

This policy documents the Rhode Island General Law (RIGL) 27-20-48 for certain Lyme disease treatments.

§ 27-20-48 Mandatory coverage for certain lyme disease treatments. – Every individual or group hospital or medical expense insurance policy or individual or group hospital or medical services plan contract delivered, issued for delivery, or renewed in this state on or after January 1, 2004 shall provide coverage for diagnostic testing and long-term antibiotic treatment of chronic lyme disease when determined to be medically necessary and ordered by a physician acting in accordance with chapter 37.5 of title 5 entitled "lyme disease diagnosis and treatment" after making a thorough evaluation of the patient's symptoms, diagnostic test results and response to treatment. Treatment otherwise eligible for benefits pursuant to this section shall not be denied solely because such treatment may be characterized as unproven, experimental, or investigational in nature.

Lyme disease is caused by the bacterium *Borrelia burgdorferi* and is transmitted to humans through the bite of infected blacklegged ticks. Typical symptoms include fever, headache, fatigue, and a characteristic skin rash called erythema migrans. If left untreated, infection can spread to joints, the heart, and the nervous system. Lyme disease is diagnosed based on symptoms, physical findings (e.g., rash), and the possibility of exposure to infected ticks; laboratory testing is helpful if used correctly and performed with validated methods. Most cases of Lyme disease can be treated successfully with antibiotics over a few weeks. Steps to prevent Lyme disease include using insect repellent, removing ticks promptly, applying pesticides, and reducing tick habitat. The ticks that transmit Lyme disease can occasionally transmit other tick-borne diseases as well.

CODING

BlueCHiP for Medicare and Commercial Products

The following CPT codes are used for testing for Lyme disease.

86617

86618

RELATED POLICIES

Not applicable

PUBLISHED

Provider Update, May 2016

Provider Update, July 2015

Provider Update, August 2014

Provider Update, September 2013

Provider Update, July 2012

Provider Update, March 2011

Provider Update, June 2010

REFERENCES

1. Rhode Island General Law (RIGL). 27-20-48 Mandatory coverage for certain lyme disease treatments. <http://webserver.rilin.state.ri.us/Statutes/TITLE27/27-20/27-20-48.HTM>
2. Centers for Disease Control and Prevention (CDC). Lyme Disease. <http://www.cdc.gov/lyme/>

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