HOUSE DOCKET, NO. FILED ON: 1/12/2009

**HOUSE . . . . . . . . . . . . . . No.**

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The Commonwealth of Massachusetts

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PRESENTED BY:

**Theodore C. Speliotis**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General  
 Court assembled:*

The undersigned legislators and/or citizens respectfully petition for the passage of the accompanying bill:

An Act relative to Lyme Disease treatment coverage.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

PETITION OF:

|  |  |
| --- | --- |
| Name: | District/Address: |
| Theodore C. Speliotis | 13th Essex |

[SIMILAR MATTER FILED IN PREVIOUS SESSION  
SEE HOUSE, NO. 1081 OF 2007-2008.]

The Commonwealth of Massachusetts

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**In the Year Two Thousand and Nine**

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An Act relative to Lyme Disease treatment coverage.

*Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:*

SECTION 1. Chapter 111, as appearing in the 2004 Official Edition, is hereby amended by inserting, after section 218, the following new sections:

SECTION 219. 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, 2010, shall provide for Lyme disease treatment.

SECTION 220. 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, 2010, 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 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. Provided, however, this section shall not apply to insurance coverage providing benefits for:

1. Hospital confinement indemnity;
2. Disability income;
3. Accident only;
4. Long-term care;
5. Medicare supplement;
6. Limited benefit health;
7. Specified disease indemnity;
8. Sickness or bodily injury or death by accident or both; and
9. Other limited benefit policies.

Section 221. Subscribers to any health maintenance organization plan shall be afforded coverage under that plan on or after January 1, 2010 for diagnostic testing and long term antibiotic treatment of chronic Lyme disease when determined to be medically necessary and ordered by a physician 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.