

1 TO THE HOUSE OF REPRESENTATIVES:

2 The Committee on Health Care to which was referred House Bill No. 123
3 entitled “An act relating to Lyme disease and other tick-borne illnesses”
4 respectfully reports that it has considered the same and recommends that the
5 bill be amended by striking out all after the enacting clause and inserting in
6 lieu thereof the following:

7 Sec. 1. FINDINGS

8 The General Assembly finds:

9 (1) Lyme disease, caused by one or more Borrelia species of spirochete
10 bacteria, is increasingly widespread in Vermont and has become endemic in
11 the State.

12 (2) Lyme disease is a fast growing vector-borne disease in Vermont.

13 (3) Lyme disease may be successfully treated with a short-term course
14 of antibiotics if diagnosed early; however, for patients whose Lyme disease is
15 not identified early, complex and ongoing symptoms may require more
16 aggressive treatment as acknowledged by the Centers for Disease Control and
17 Prevention and the International Lyme and Associated Diseases Society.

18 (4) Treatment of Lyme disease needs to be tailored to the individual
19 patient, and there is a range of opinions within the medical community
20 regarding proper treatment of Lyme disease.

1 (5) Coinfection by other tick-borne illnesses may complicate and
2 lengthen the course of treatment.

3 Sec. 2. PURPOSE

4 The purpose of this act is to ensure that patients have access to treatment for
5 Lyme disease and other tick-borne illnesses in accordance with their needs and
6 the clinical judgment of their physicians.

7 Sec. 3. POLICY STATEMENT

8 A policy statement clearly communicating the following shall be issued by
9 the Vermont State Board of Medical Practice to physicians licensed pursuant
10 to 26 V.S.A. chapter 23 and to physician assistants licensed pursuant to
11 26 V.S.A. chapter 31; the Vermont Board of Osteopathic Physicians to
12 physicians licensed pursuant to 26 V.S.A. chapter 33; and the Vermont Board
13 of Nursing to advanced practice registered nurses licensed pursuant to 26
14 V.S.A. chapter 28:

15 (1) a physician, physician assistant, or nurse practitioner, as appropriate,
16 shall document the basis for diagnosis of and treatment for Lyme disease, other
17 tick-borne illness, or coinfection in a patient's medical record;

18 (2) a physician, physician assistant, or nurse practitioner, as appropriate,
19 shall obtain a patient's informed consent in writing prior to administering any
20 proposed long-term treatment for Lyme disease, other tick-borne illness, or
21 coinfection; and

1 (3) the Board shall not pursue disciplinary action against a physician,
2 physician assistant, or nurse practitioner, as appropriate, solely for the use of
3 medical care recognized by the guidelines of the Centers for Disease Control
4 and Prevention, Infectious Diseases Society of America, or International Lyme
5 and Associated Diseases Society for the treatment of a patient’s symptoms
6 when the patient is clinically diagnosed with Lyme disease or other tick-borne
7 illness; however, this does not preclude discipline for errors, omissions, or
8 other misconduct when practicing within such guidelines.

9 Sec. 4. EFFECTIVE DATE

10 This act shall take effect on July 1, 2014.

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13 (Committee vote: _____)

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Representative [surname]

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FOR THE COMMITTEE

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