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## POLITICAL ACTION: State Legislation in the Lymelight

26th



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Rhode Island was the first state in the nation to pass legislation protecting doctors who treat people with chronic Lyme disease from prosecution by state medical boards solely for that treatment. Rhode Island was also the first – and to date, only – state to reach an agreement with a large insurance provider. The agreement stipulated that “neither Blue Cross nor the independent reviewer, shall contest, reverse or deny coverage based upon a physician’s or long term antibiotic therapy solely on ground that such treatment may be characterized as unproven, experimental or investigational in nature.” The following article was published in the Summer 2002 issue of the Lyme Times, and is available

full in the CALDA archives.

### Rhode Island Governor Signs New Lyme Bill

Lyme Disease patients in Rhode Island had reason to celebrate earlier this summer as the state legislature unanimously passed a law titled, “The Lyme Disease Diagnosis and Treatment Act.” The bill was sponsored by State Senator Susan Sosnowski and co-sponsored by Representative Peter T. Ginaitt. Senator Sosnowski was quoted in the Block Island Times (June 22, 2002), as calling the law “a monumental first step.”

The law protects physicians in Rhode Island from being subject to disciplinary action from Rhode Island’s Board of Medical Licensure and Discipline solely for prescribing, administering or dispensing long term antibiotic therapy for a therapeutic purpose for a patient clinically diagnosed with Lyme disease, as long as this diagnosis and treatment plan has been documented in the physician’s medical record for that patient.

This law defines Lyme disease beyond the CDC criteria. In addition, after negotiations between Blue Cross/Blue Shield of Rhode Island (BC/BS of RI), Rhode Island’s largest

insurer and Governor Almond's Chief of Staff, Joseph S. Larisa Jr., an agreement was reached. BC/BS of RI agreed to adopt in its policy that they may cover long term antibiotic therapy (meaning administration of oral, intramuscular or intravenous antibiotics, single combination, for periods of greater than four weeks) to control a patient's symptoms determined by the physician as reasonably related to Lyme disease and its sequelae, v physician, acting in accordance with the Lyme Disease Diagnosis and Treatment Act (R Gen.Laws 5-37.5 et seq.), orders such therapy after making a thorough evaluation of patient's symptoms, diagnostic test results, response to treatment, and physician-documented objective clinical change.

The agreement also states that neither Blue Cross nor the independent reviewer, shall contest, reverse or deny coverage based upon a physician's order of long term antibiotic therapy solely on the ground that such treatment may be characterized as unproven, experimental, or investigational in nature. Also, during the pendency of the review, the prescribed treatment shall be covered by Blue Cross.

*You don't have to be a CALDA member to read more about how Governor Almond signed an Executive Order (01-09) on November 6th, 2001, creating the Governor's Commission on Lyme disease and Tick-Borne Infections. The story also covers some of the testimony at the two public hearings.*

Go to the CALDA [Lyme Times Archives](#).

To read the full text of the RI law and the Blue Cross/Blue Shield of RI agreement, go [Lyme Disease Association website](#).

The text of the Rhode Island Diagnosis & Treatment Act is [here](#).

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