Subject: Lyme Disease Intravenous Therapy*

Effective Date: September 10, 2002

Department(s): Utilization Management

Policy: Intravenous therapy of Lyme disease is reimbursable under Plans administered by QualCare, Inc. when criteria in this policy are met.

Objective: To ensure proper and consistent reimbursement for the treatment of Lyme disease, and to provide objective criteria to be used to substantiate the medical necessity of such treatment.

Procedure:

1. All intravenous therapy for Lyme disease requires review and prior authorization by the Medical Director.

2. All requests for coverage of intravenous therapy for Lyme disease shall be accompanied by a report of the history and physical findings on which the diagnosis is based.

3. Laboratory confirmation requires both Enzyme-Linked Immunosorbent Assay (ELISA) and Immunoblot tests that are positive according to the reporting laboratory.

4. Coverage of a course of intravenous therapy shall extend for an interval of up to four weeks. For patients with a partial response to this therapy, a second four-week course of therapy may be
authorized, subject to the same prior authorization and Medical Director review as the first course of therapy.

5. Intravenous therapy for Lyme disease shall only be authorized for patients with early or late neurologic abnormalities (other than isolated facial palsy), documented arthritis, and/or ativoventricular block (PR interval >0.2 sec or second or third degree heart block).

6. Intravenous therapy for Lyme disease will only be covered when administered in an outpatient setting.

References:


Cameron DJ. Insufficient evidence to deny antibiotic treatment to chronic Lyme disease patients. Med Hypotheses 2009;72(6):688-691 (Jun)


Halperin JJ. Nervous system Lyme disease: Diagnosis and Treatment. Rev Neurol Dis 2009;6(1):4-12 (Winter)


Stricker RB. Counterpoint: Long-Term Antibiotic Therapy Improves Persistent Symptoms Associated with Lyme Disease. Clinical Inf Dis 2007;45(2):149-157 (Jul 15)


Sigal LH. Misconceptions about Lyme Disease: Confusions Hiding behind Ill-Chosen Terminology. Ann Intern Med 2002;136:413-419 (March 5)


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*Consistent with Summary Plan Description (SPD). When there is discordance between this policy and the SPD, the provisions of the SPD prevail.