

Part 12:
Insurance giant's policy: deny Lyme coverage

In the late 1990's, a group of people with Lyme/+ filed a lawsuit against their health insurance carrier, Empire Blue Cross Blue Shield. The case was heard by the Supreme Court of the State of New York, County of Westchester.

Science journalist Pamela Weintraub reported details of that hearing in a chapter titled "Red-Flagged at Blue Cross: The Role of Managed Care" in her book "Cure Unknown: Inside the Epidemic." (pp. 303-306)

In the course of the lawsuit, legal counsel was able to depose, under oath, Empire's former chief medical executive and vice president, Dr. Richard Sanchez, on Feb. 23, 1999.

Weintraub reported that Dr. Sanchez was brought on board as an executive at Empire in 1995 reportedly based on his reputation as part of a group in California that had slashed managed care costs in order to raise profits.

Dr. Sanchez explained that Empire "tightened up the definition of diagnosis ... fully understanding that there would be people who thought they had Lyme disease or had been treated for Lyme disease or who were seronegative who were not going to meet the criteria."

Weintraub elaborated, "The requirements set a higher bar, by far, than the surveillance standard established by the CDC. Requiring the same individual to have *both* a physician-diagnosed rash and a positive Western blot meant that large numbers of textbook-classic patients would be ruled out. ...

"Thus, a patient who met both requirements was rare," Weintraub noted.

When Dr. Sanchez was asked if he was aware of any scientific or medical justification for the policy, he replied, "No. We clearly knew that some patients would not fit the classic policy or definition."

The former Empire executive said it was common knowledge that: "Any time you put up a hurdle, certain people will fight to get over it and others will accept it and not appeal."

The lawyer conducting the deposition, Ira Maurer, asked Dr. Sanchez, "Doctor, what's your understanding as to how fast Lyme bacteria can spread from the location of the tick bite to the brain?" (p. 305)

The doctor replied, "It can be as short as a week and as long as six weeks. My understanding of the subject currently is that aggressive intravenous administration very early on in any suspected dissemination of the disease is the appropriate choice." (p. 306)

But, the former Empire vice president concluded in his deposition: "It was our policy not to approve."

Next: Reports of rewarding doctors for denying Lyme treatments