

Part 11:
Insurance companies profit from IDSA guidelines

The ruling U.S. Infectious Diseases Society of America (IDSA) guidelines for the diagnosis and treatment of Lyme/+ have significant consequences--first and foremost for those who are ill.

The Connecticut Attorney General's office explained in its May 1, 2008 media statement: "The IDSA guidelines have sweeping and significant impacts on Lyme disease medical care. They are commonly applied by insurance companies in restricting coverage for long-term antibiotic treatment or other medical care and also strongly influence physician treatment decisions." (mdjunction.com)

Juris Doctor Susan Ronn described the impact on people with Lyme and its co-infections in an article headlined, "In the Lymelight: Law and Clinical Practice Guidelines." (June 2009, Southern Medical Law Journal)

Ronn explained: "In the United States, clinical practice guidelines quickly become the standard of care and also influence insurance company reimbursements to patients. Insurance companies adopt their own guidelines for reimbursement based, in large part, on prevailing treatment guidelines."

That means, Ronn continued, "Patients treated with antibiotics outside IDSA guideline recommendations thus bear the burden of payment for their treatment, despite being insured."

Science research and author Pamela Weintraub revealed the pattern of denial of Lyme/+ treatment by insurance companies, in their drive for profits, in her book "Cure Unknown: Inside the Lyme Epidemic." (St. Martin's Griffin, New York: 2008, 2009)

Pamela Weintraub wrote: "Lest anyone think that insurers were simply following the trail of science--or what they thought was science--evidence shows that by the middle of the 1990s, Lyme disease had been 'red-flagged' at the highest levels of insurance and managed care companies as a draining expense. As the true cost became clear, these companies established cost-containment policies for Lyme disease." (p. 304)

Weintraub concluded, "While denials could sometimes be appealed, the appeal process was long, arduous, and often unsuccessful. By the time a patient was approved, if that ever occurred, the illness might have progressed to a far more debilitating stage, to the brain." (p. 304)

Next: Insurance giants' policy: deny Lyme coverage