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Report on 2015 Claims for Treatment of Lyme Disease and Other Tick-Borne Illnesses

PREPARED BY THE MAINE BUREAU OF INSURANCE
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Table of Contents

Background	1
Tick-Borne Illness Claims by Category	2
Reasons for Denied Tick-Borne Illness Claims	3
Appeals/Reconsiderations/External Reviews for All Tick-Borne Illnesses	3
Lyme Disease Claims by Treatment Type	4

Background

Pursuant to 24-A M.R.S.A. §4302(5), the Superintendent of Insurance must report annually to the Joint Standing Committee on Insurance and Financial Services information related to insurance claims for the diagnosis and treatment of Lyme disease, and other tick-borne illnesses for all covered individuals in the State of Maine.

This report covers calendar year 2015. It provides data about the number of claims made for the diagnosis and treatment of Lyme disease and other tick-borne illnesses; the number of claim denials and reasons for those denials; the number and outcome of internal appeals; the total dollar amounts of paid claims; and the number of external appeals related to the treatment of Lyme disease and other tick-borne illnesses.

The Maine Center for Disease Control and Prevention identified five kinds of reported tick-borne illnesses in Maine: Lyme disease, Babesiosis, Ehrlichiosis (Anaplasmosis), Rocky Mountain Spotted Fever, and Powassan virus. Insurance carriers licensed to write health insurance coverage in Maine are required to report claims information for all five tick-borne illnesses to the Bureau.

Data is collected via an online reporting form and includes claims for all insured Maine residents. However, the data does not include MaineCare or Medicare claims. Respondents include active insurers with authority to write health insurance in Maine. There was a 100% percent response rate from insurers.

Tick-Borne Illness Claims by Category

Table 1 lists the number of claims submitted, paid and denied, by category of tick-borne illness, as well as the total amount paid for claims. The reported data includes claims made for the diagnosis and treatment of tick-borne illnesses in 2015 for covered individuals in Maine. Five categories of tick-borne illnesses are listed based upon the International Classification of Diseases (ICD-10 codes).

The figures in Table 1 represent the number of claims reported, not the number of enrollees with a tick-borne illness. One enrollee may have several claims within the calendar year relating to a tick-borne illness. The “Percentage of Claims Paid” column is calculated by dividing the number of claims paid for a category (e.g., Lyme) by the number of claims submitted for that category.

Table 1. Tick-Borne Illness Claims by Category, 2015					
Category	Submitted	Paid	Denied	Percentage of Claims Paid	Total Paid
Babesiosis	429	392	37	91.38%	\$161,501.01
Ehrlichiosis (Anaplasmosis)	171	132	39	77.19%	\$126,603.41
Lyme disease	5,986	5,389	575	90.03%	\$1,212,923.42
Powassan virus	0	0	0	0.00%	\$0.00
Rocky Mountain Spotted Fever	20	19	1	95.00%	\$130,052.25
Total:	6,606	5,932	652	89.80%	\$1,631,080.09

Reasons for Denied Tick-Borne Illness Claims

Table 2 lists the reasons given for denied claims related to any treatment for tick-borne illnesses. A claim may have multiple reasons for denial. The top four (4) reasons for denial were Duplicate Claim, No Pre-Authorization, Not a Covered Benefit, and Incorrect Coding. The Other Reasons category included Multiple Providers on Claim, Claim Exceeds Timely Filing Limit, and Incidental Procedure.

Table 2. Reasons for Denied Tick-Borne Illness Claims, 2015	
Reasons for Denial	Number of Denied Claims
Duplicate Claim	80
No Pre-Authorization	75
Not a Covered Benefit	53
Incorrect Coding	42
Coverage Terminated	37
Maximum Benefits Exceeded	32
Not Medically Necessary	30
More Information Requested/Not Received	21
Non-Participating Provider	15
Considered Experimental/Investigational	0
Pre-existing conditions Exclusion	0
Other Reasons for Denial	269
Total:	654

Appeals/Reconsiderations/External Reviews for All Tick-Borne Illnesses

Table 3 provides the number of appeals and reconsiderations that were conducted by the insurance companies reporting data to the Bureau of Insurance. The Bureau had no requests for an independent external review relating to tick-borne illnesses in 2015.

Table 3. Number of Appeals/Reconsiderations and External Reviews for All Tick-Borne Illnesses, 2015				
	Upheld	Overtured	Other	Total
Appeals/Reconsideration (Internal)	1	0	0	1
Independent External Reviews (Conducted by the Insurer, not the Bureau of Insurance)	0	0	0	0
Total:	1	0	0	1

Lyme Disease Claims by Treatment Type

Table 4 shows the number of Lyme disease claims by type of treatment provided for covered individuals. Claims for antibiotic treatment by any means of administration are counted.

The Percent of Claims Paid column is calculated by dividing the number of claims paid for a treatment type by the number of claims submitted for that treatment type. It is possible for information about one enrollee to be entered in more than one category. For example, an enrollee could have paid claims for antibiotics and have paid claims for other types of treatment, such as physical therapy.

Some insurers provided detail about what Other Treatment meant. Among those reporting this information, the majority of paid claims were for Physical Therapy or Chiropractic Visits.

Table 4. Lyme Disease Claims by Treatment Type, 2015					
Treatment Type	Submitted	Paid	Percent of Claims Paid	Denied	Total Paid
Antibiotic Treatment	2,051	1,893	92.30%	158	\$303,772.51
Other Treatment	4,220	3,730	88.39%	473	\$878,689.54
Total:	6,271	5,623	89.67%	631	\$1,182,462.05