

Universal Blood Lead Testing Update

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Overview

- Senate Bill 31 and House Bill 4200
- Public Act 145 and 146
- Rulemaking Process
- MDHHS Roll Out Plan
 - Educational Material
 - Outreach and Engagement
 - Blood Lead Testing Support
- Discussion

Senate Bill 31/House Bill 4200

- Signed by Governor Whitmer on 10/3/2023
- Effective date of January 1, 2024



Public Act 145 and 146

- Physicians must test, or order a test, for lead in blood for all minors at 12 and 24 months of age (age one and 2), or between age 24 and 72 months (i.e., sixth birthday) if there is no record of a previous test.
- Minors living in geographic areas of the state determined by MDHHS to pose a high risk for lead poisoning must be tested additionally at age 4.
- As well as age-based testing requirements, minors should be tested at “intervals determined by MDHHS” if a physician determines or the parent attests that the minor is at “high risk” for “lead poisoning.”
- The testing mandates do not apply if the parent/guardian/in loco parentis objects to the testing.
- Physicians must ensure that the child’s blood lead test results are included in the minor’s “certificate of Immunization”.

Rulemaking Process



- Expedited rules for mandated parts of the statute, to be in effect 1/1/2024
 - Physicians must test, or order a test, for lead in blood for all minors at 12 and 24 months of age (age one and 2), or between age 24 and 72 months (i.e., sixth birthday) if there is no record of a previous test.
- Full Rulemaking Process for remainder of the components in the statute
 - Drafting rules and sending out for stakeholder comment
 - 6-9 month process
 - Public Hearing

High Risk Geographic Areas



- MDHHS in rules must: identify “.... geographic areas of this state that pose a high risk for childhood lead poisoning and a requirement that a minor who is 4 years of age be tested if the minor resides in an area described in this subdivision.”

High Risk Factors

- As well as age-based testing requirements, MDHHS in rules must define factors that identify a minor who is “at high risk for lead poisoning” and define “intervals” when the minor should be tested if a physician determines or the parent attests that the minor is at “high risk” for “lead poisoning.”
- The statute says risk factors must include, but are not limited to:
 - Residing in a home where other minors have been diagnosed with lead poisoning
 - Residing in a home that was built before 1978

Health Education

- Revamp existing materials
 - updates to the website ([Michigan.gov/mileadsafe](https://michigan.gov/mileadsafe))
 - Provider Quick Reference
- Q&A for Health Care Providers, LHDs, Public
- Press Release
- Mass Media Campaign
- Newsletter Articles
- Social Media

Blood Lead Testing Support



- Development of Materials
 - Microtainer PowerPoint, Tips & Tricks Document, Video
 - Billing One-Pager
- MDHHS CLPPP Blood Lead Testing Coordinator

Outreach and Engagement

- Meetings scheduled in mid-November/early December
 - MAPPP
 - MALEHA
 - Health Educators
 - NAF
- Stakeholders
 - Parents/Caretakers
 - Physicians
 - Lead Poisoning Prevention Stakeholders, Advocates, Partners

Discussion Questions

- Are there any additional topics or activities that should be considered?
- What barriers (if any) do you anticipate with universal testing for your communities?
- Are there ways you could help be a conduit for information on universal testing? Are there audiences, venues, organizations, etc. you can help us connect with?
 - Provide information sessions
 - Send e-mail updates

Thank you!

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