
By: Delegate Hubbard

Introduced and read first time: January 19, 1996

Assigned to: Environmental Matters

A BILL ENTITLED

1 AN ACT concerning

2 **Targeted Childhood Lead Screening Program**

3 FOR the purpose of requiring the Department of Health and Mental Hygiene to establish
4 and administer a Lead Poisoning Screening Program, for certain purposes, and
5 using certain criteria and payment mechanisms; requiring the Department of the
6 Environment to assure statewide coordinated case management for certain
7 individuals; specifying certain components of statewide coordinated case
8 management; requiring the Department of the Environment to establish a Lead
9 Poisoning Outreach and Education Program for certain purposes, and allowing that
10 Department to contract with outside sources for that Program; requiring certain
11 documentation to be provided to certain child care providers within a certain
12 period; requiring the Department of the Environment, in conjunction with certain
13 other units, to develop and report on a certain plan by a certain date; requiring a
14 certain case management program to be in place by a certain date; deleting obsolete
15 language; providing for the termination of a certain portion of this Act; and
16 generally relating to lead screening of children.

17 BY repealing and reenacting, with amendments,
18 Article - Environment
19 Section 6-303
20 Annotated Code of Maryland
21 (1993 Replacement Volume and 1995 Supplement)

22 BY adding to
23 Article - Environment
24 Section 6-304
25 Annotated Code of Maryland
26 (1993 Replacement Volume and 1995 Supplement)

27 BY adding to
28 Article - Health - General
29 Section 18-106
30 Annotated Code of Maryland
31 (1994 Replacement Volume and 1995 Supplement)

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1 BY adding to
2 Article - Family Law
3 Section 5-556.1, 5-580.2, and 5-589.1
4 Annotated Code of Maryland
5 (1991 Replacement Volume and 1995 Supplement)

6 BY repealing and reenacting, with amendments,
7 Article - Environment
8 Section 6-304
9 Annotated Code of Maryland
10 (1993 Replacement Volume and 1995 Supplement)
11 (As enacted by Section 1 of this Act)

12 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
13 MARYLAND, That the Laws of Maryland read as follows:

14 **Article - Environment**

15 6-303.

16 (a) A medical laboratory shall report to the Department the results of all blood
17 lead [or erythrocyte protoporphyryn] tests performed on any child 18 years and under.

18 (b) The Department shall report the results of blood lead [or erythrocyte
19 protoporphyryn] tests indicating an elevated blood lead level, as defined by regulation, to:

20 (1) The local health department in the jurisdiction where the child resides;
21 and

22 (2) The Department of Health and Mental Hygiene.

23 (c) The Department shall adopt regulations to:

24 (1) Govern the reporting requirements of laboratories to the Department
25 under subsection (a) of this section; and

26 (2) Provide for the reporting of information by the Department to local
27 health departments and the Department of Health and Mental Hygiene.

28 6-304.

29 (A) (1) SUBJECT TO PARAGRAPH (2) OF THIS SUBSECTION, THE SECRETARY
30 SHALL ASSURE THE STATEWIDE COORDINATED CASE MANAGEMENT OF CHILDREN
31 WITH ELEVATED BLOOD LEAD LEVELS GREATER THAN OR EQUAL TO 15
32 MICROGRAMS PER DECILITER (UG/DL).

33 (2) STATEWIDE COORDINATED CASE MANAGEMENT OF CHILDREN
34 WITH ELEVATED BLOOD LEAD LEVELS GREATER THAN OR EQUAL TO 15 UG/DL AND
35 LESS THAN 20 UG/DL SHALL CONSIST OF:

36 (I) NOTICE TO THE CHILD'S PARENTS AND HEALTH CARE
37 PROVIDER; AND

3

1 (II) IN THE CASE OF A CHILD WHO LIVES IN A RENTAL DWELLING
2 UNIT:

3 1. NOTICE TO THE CHILD'S LANDLORD THAT A RESIDENT
4 OF THE UNIT HAS ELEVATED BLOOD LEAD; AND

5 2. ADMINISTRATIVE VERIFICATION TO ENSURE THAT THE
6 UNIT IS TREATED IN CONFORMITY WITH THE APPLICABLE RISK REDUCTION
7 STANDARD UNDER § 6-815 OR § 6-819 OF THIS TITLE.

8 (B) (1) THE SECRETARY SHALL ESTABLISH A LEAD POISONING OUTREACH
9 AND EDUCATION PROGRAM DESIGNED TO:

10 (I) INFORM PARENTS OF THE NEED TO SCREEN THEIR CHILDREN
11 FOR LEAD POISONING;

12 (II) INFORM PARENTS OF THE DANGERS OF LEAD POISONING;

13 (III) EDUCATE PARENTS ON HOW TO IDENTIFY CONDITIONS IN
14 HOUSING THAT LEAD TO LEAD POISONING;

15 (IV) EDUCATE PARENTS ON HOW TO MINIMIZE AND CONTROL
16 LEAD PARTICULATE GENERATION AND ACCUMULATION;

17 (V) TEACH AND INFORM PARENTS TO ASSESS LEAD HAZARDS
18 FROM AN IN-HOME PERSPECTIVE;

19 (VI) TEACH PARENTS ABOUT THE NUTRITIONAL AND DIETARY
20 PRACTICES THAT AFFECT LEAD ABSORPTION IN CHILDREN;

21 (VII) INSTRUCT PARENTS LIVING IN RENTAL PROPERTY OF THEIR
22 RIGHTS AND RESPONSIBILITIES IN THEIR RELATIONSHIP WITH THEIR LANDLORD;
23 AND

24 (VIII) INFORM PARENTS OF INFORMATION ABOUT LEAD POISONING
25 AND LEAD MITIGATION FOR IMPROVING THE LIVES OF THEIR CHILDREN.

26 (2) THE SECRETARY MAY CONTRACT WITH OUTSIDE SOURCES TO
27 PROVIDE THE SERVICES REQUIRED BY THE LEAD POISONING OUTREACH AND
28 EDUCATION PROGRAM.

29 **Article - Health - General**

30 18-106.

31 (A) THE SECRETARY SHALL ESTABLISH AND ADMINISTER A LEAD POISONING
32 SCREENING PROGRAM THAT WILL ASSURE THE APPROPRIATE SCREENING OF
33 CHILDREN IN MARYLAND FOR LEAD POISONING.

34 (B) THE LEAD POISONING SCREENING PROGRAM SHALL:

35 (1) ENCOURAGE CONTINUITY OF CARE WITH THE CHILD'S CONTINUING
36 CARE HEALTH CARE PROVIDER;

4

1 (2) PROMOTE TIMELY, APPROPRIATE SCREENING OF CHILDREN AT
2 RISK OF BEING POISONED BY LEAD;

3 (3) UTILIZE ALL OF THE PAYMENT MECHANISMS AVAILABLE TO COVER
4 LEAD POISONING SCREENING, INCLUDING:

5 (I) THIRD PARTY PAYMENTS FROM INSURERS;

6 (II) THE MEDICAL ASSISTANCE PROGRAM;

7 (III) PRIMARY CARE MEDICAL ASSISTANCE PROGRAMS
8 ESTABLISHED UNDER WAIVER FROM THE FEDERAL GOVERNMENT;

9 (IV) HEALTH MAINTENANCE ORGANIZATIONS;

10 (V) FEDERALLY QUALIFIED AND MARYLAND QUALIFIED
11 COMMUNITY HEALTH CENTERS;

12 (VI) ANY OTHER MEDICAID REIMBURSEMENT OR WAIVER TO
13 WHICH THE STATE MAY BE ENTITLED UNDER THIS SECTION; AND

14 (VII) ANY OTHER AVAILABLE PAYMENT SOURCE;

15 (4) TARGET CHILDREN UNDER 6 YEARS OF AGE;

16 (5) PROVIDE LEAD POISONING SCREENING ON A SLIDING FEE SCALE AT
17 SITES DESIGNATED BY LOCAL HEALTH DEPARTMENTS FOR CHILDREN UNABLE TO
18 AFFORD LEAD POISONING SCREENING; AND

19 (6) EMPLOY AN INITIAL QUESTIONNAIRE TO ASSESS CHILDREN'S
20 EXPOSURE TO POTENTIAL LEAD HAZARDS IN ORDER TO SELECT THOSE CHILDREN
21 MOST AT RISK FOR LEAD POISONING.

22 (C) THE SECRETARY SHALL TARGET EFFORTS TO PROMOTE AND TO
23 PROVIDE LEAD POISONING SCREENING TO AREAS OF HIGHEST PRIORITY, THAT
24 SHALL INCLUDE AREAS IDENTIFIED BY:

25 (1) CENSUS TRACT INFORMATION NOTING AREAS WITH LARGE
26 CONCENTRATIONS OF PRE-1978 HOUSING;

27 (2) ADDRESSES OF PREVIOUSLY REPORTED CASES OF ELEVATED
28 BLOOD LEAD LEVELS;

29 (3) HIGHEST RATES OF LEAD POISONING AS EVIDENCED BY
30 INFORMATION PROVIDED TO AND BY THE CHILDHOOD LEAD REGISTRY
31 ESTABLISHED AND MAINTAINED BY THE DEPARTMENT OF THE ENVIRONMENT; AND

32 (4) ANY OTHER AVAILABLE DATA FOR THE IDENTIFICATION OF LEAD
33 HAZARDS THAT THE SECRETARY MAY DEEM APPROPRIATE.

5

1 **Article - Family Law**

2 5-556.1.

3 WITHIN 30 DAYS AFTER A CHILD UNDER THE AGE OF 6 YEARS ENTERS CARE IN
4 A FAMILY DAY CARE HOME, A PARENT OR GUARDIAN OF THE CHILD SHALL
5 PROVIDE TO THE FAMILY DAY CARE HOME EVIDENCE OF AN APPROPRIATE
6 SCREENING FOR LEAD POISONING. THIS EVIDENCE MAY INCLUDE
7 DOCUMENTATION FROM THE CHILD'S CONTINUING CARE HEALTH CARE PROVIDER
8 THAT THE CHILD WAS SCREENED THROUGH AN INITIAL QUESTIONNAIRE AND WAS
9 DETERMINED NOT TO BE AT RISK FOR LEAD POISONING.

10 5-580.2.

11 WITHIN 30 DAYS AFTER A CHILD UNDER THE AGE OF 6 YEARS ENTERS CARE IN
12 A CHILD CARE CENTER, A PARENT OR GUARDIAN OF THE CHILD SHALL PROVIDE TO
13 THE CHILD CARE CENTER EVIDENCE OF AN APPROPRIATE SCREENING FOR LEAD
14 POISONING. THIS EVIDENCE MAY INCLUDE DOCUMENTATION FROM THE CHILD'S
15 CONTINUING CARE HEALTH CARE PROVIDER THAT THE CHILD WAS SCREENED
16 THROUGH AN INITIAL QUESTIONNAIRE AND WAS DETERMINED NOT TO BE AT RISK
17 FOR LEAD POISONING.

18 5-589.1.

19 WITHIN 30 DAYS AFTER A CHILD UNDER THE AGE OF 6 YEARS ENTERS CARE IN
20 A CHILD CARE CENTER IN A STATE-OCCUPIED BUILDING, A PARENT OR GUARDIAN
21 OF THE CHILD SHALL PROVIDE TO THE CHILD CARE CENTER EVIDENCE OF AN
22 APPROPRIATE SCREENING FOR LEAD POISONING. THIS EVIDENCE MAY INCLUDE
23 DOCUMENTATION FROM THE CHILD'S CONTINUING CARE HEALTH CARE PROVIDER
24 THAT THE CHILD WAS SCREENED THROUGH AN INITIAL QUESTIONNAIRE AND WAS
25 DETERMINED NOT TO BE AT RISK FOR LEAD POISONING.

26 SECTION 2. AND BE IT FURTHER ENACTED, That the Laws of Maryland
27 read as follows:

28 **Article - Environment**

29 6-304.

30 [(a)] (1) Subject to paragraph (2) of this subsection, the Secretary shall assure the
31 statewide coordinated case management of children with elevated blood lead levels
32 greater than or equal to 15 micrograms per deciliter (ug/dl).

33 (2) Statewide coordinated case management of children with elevated blood
34 lead levels greater than or equal to 15 ug/dl and less than 20 ug/dl shall consist of:

35 (i) Notice to the child's parents and health care provider; and

36 (ii) In the case of a child who lives in a rental dwelling unit:

37 1. Notice to the child's landlord that a resident of the unit has
38 elevated blood lead; and

