

EMERGENCY BILL

H1
HB 289/95 - ENV

6lr1059

By: ~~Delegate Hubbard~~ Delegates Hubbard, D. Davis, Guns, Nathan-Pulliam, Oaks, and C. Mitchell

Introduced and read first time: January 19, 1996
Assigned to: Environmental Matters

Committee Report: Favorable with amendments
House action: Adopted
Read second time: March 25, 1996

CHAPTER _____

1 AN ACT concerning

2 ~~Targeted Lead - Childhood Lead Screening Program - Work Practices and Accreditation~~ 3

Exemption

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

20 BY repealing and reenacting, with amendments,
21 Article - Environment
22 Section 6-303 and 6-821
23 Annotated Code of Maryland
24 (1993 Replacement Volume and 1995 Supplement)

25 BY adding to

2

1 Article - Environment
2 Section 6-304
3 Annotated Code of Maryland
4 (1993 Replacement Volume and 1995 Supplement)

5 BY adding to

6 Article - Health - General
7 Section 18-106
8 Annotated Code of Maryland
9 (1994 Replacement Volume and 1995 Supplement)

10 BY adding to

11 Article - Family Law
12 Section 5-556.1, 5-580.2, and 5-589.1
13 Annotated Code of Maryland
14 (1991 Replacement Volume and 1995 Supplement)

15 ~~BY repealing and reenacting, with amendments,~~

16 ~~Article - Environment~~
17 ~~Section 6-304~~
18 ~~Annotated Code of Maryland~~
19 ~~(1993 Replacement Volume and 1995 Supplement)~~
20 ~~(As enacted by Section 1 of this Act)~~

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

23 **Article - Environment**

24 6-303.

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

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

29 (1) The local health department in the jurisdiction where the child resides;
30 and

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

32 (c) The Department shall adopt regulations to:

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

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

1 6-304.

2 (A) ~~(1) SUBJECT TO PARAGRAPH (2) OF THIS SUBSECTION, THE SECRETARY~~
3 ~~SHALL ASSURE THE STATEWIDE COORDINATED ASSIST LOCAL GOVERNMENTS, IF~~
4 ~~NECESSARY, TO PROVIDE~~ CASE MANAGEMENT OF CHILDREN WITH ELEVATED
5 BLOOD LEAD LEVELS GREATER THAN OR EQUAL TO 15 MICROGRAMS PER
6 DECILITER (UG/DL).

7 ~~(2) STATEWIDE COORDINATED CASE MANAGEMENT OF CHILDREN~~
8 ~~WITH~~

9 (B) A LOCAL HEALTH DEPARTMENT THAT RECEIVES THE RESULTS OF A
10 BLOOD LEAD TEST INDICATING THAT A CHILD UNDER 6 YEARS OF AGE HAS AN
11 ELEVATED BLOOD LEAD LEVELS LEVEL GREATER THAN OR EQUAL TO 15 UG/DL
12 AND LESS THAN 20 UG/DL SHALL CONSIST OF:

13 ~~(I) NOTICE TO THE CHILD'S PARENTS AND HEALTH CARE~~
14 ~~PROVIDER; AND~~

15 ~~(II)~~
16 NOTIFY:

17 (1) THE CHILD'S PARENTS; AND

18 (2) IN THE CASE OF A CHILD WHO LIVES IN A RENTAL DWELLING UNIT;
19 THE OWNER OF THE RENTAL DWELLING UNIT WHERE THE CHILD RESIDES.

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

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

25 ~~(B) (1) THE SECRETARY SHALL ESTABLISH A LEAD POISONING OUTREACH~~
26 ~~AND EDUCATION PROGRAM DESIGNED TO:~~

27 ~~(I) INFORM PARENTS OF THE NEED TO SCREEN THEIR CHILDREN~~
28 ~~FOR LEAD POISONING;~~

29 ~~(II) INFORM PARENTS OF THE DANGERS OF LEAD POISONING;~~

30 ~~(III) EDUCATE PARENTS ON HOW TO IDENTIFY CONDITIONS IN~~
31 ~~HOUSING THAT LEAD TO LEAD POISONING;~~

32 ~~(IV) EDUCATE PARENTS ON HOW TO MINIMIZE AND CONTROL~~
33 ~~LEAD PARTICULATE GENERATION AND ACCUMULATION;~~

34 ~~(V) TEACH AND INFORM PARENTS TO ASSESS LEAD HAZARDS~~
35 ~~FROM AN IN-HOME PERSPECTIVE;~~

36 ~~(VI) TEACH PARENTS ABOUT THE NUTRITIONAL AND DIETARY~~
37 ~~PRACTICES THAT AFFECT LEAD ABSORPTION IN CHILDREN;~~

4

1 ~~(VII) INSTRUCT PARENTS LIVING IN RENTAL PROPERTY OF THEIR~~
2 ~~RIGHTS AND RESPONSIBILITIES IN THEIR RELATIONSHIP WITH THEIR LANDLORD;~~
3 ~~AND~~

4 ~~(VIII) INFORM PARENTS OF INFORMATION ABOUT LEAD POISONING~~
5 ~~AND LEAD MITIGATION FOR IMPROVING THE LIVES OF THEIR CHILDREN.~~

6 ~~(2) THE SECRETARY MAY CONTRACT WITH OUTSIDE SOURCES TO~~
7 ~~PROVIDE THE SERVICES REQUIRED BY THE LEAD POISONING OUTREACH AND~~
8 ~~EDUCATION PROGRAM.~~

9 **Article - Health - General**

10 18-106.

11 (A) THE SECRETARY SHALL ESTABLISH AND ADMINISTER A LEAD POISONING
12 SCREENING PROGRAM THAT WILL ASSURE THE APPROPRIATE SCREENING OF
13 CHILDREN IN MARYLAND FOR LEAD POISONING.

14 (B) THE LEAD POISONING SCREENING PROGRAM SHALL:

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

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

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

21 (I) THIRD PARTY PAYMENTS FROM INSURERS;

22 (II) THE MEDICAL ASSISTANCE PROGRAM;

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

25 (IV) HEALTH MAINTENANCE ORGANIZATIONS;

26 (V) FEDERALLY QUALIFIED AND MARYLAND QUALIFIED
27 COMMUNITY HEALTH CENTERS; AND

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

30 ~~(VII) ANY OTHER AVAILABLE PAYMENT SOURCE;~~

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

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

35 (6) EMPLOY AN INITIAL QUESTIONNAIRE TO ASSESS CHILDREN'S
36 EXPOSURE TO POTENTIAL LEAD HAZARDS ~~IN ORDER TO SELECT THOSE CHILDREN~~

5

1 ~~MOST AT RISK FOR LEAD POISONING, EXCEPT THAT CHILDREN RESIDING IN AREAS~~
2 ~~OF HIGHEST RISK MAY BE SCREENED BY A VENOUS BLOOD TEST.~~

3 (C) THE SECRETARY SHALL TARGET EFFORTS TO PROMOTE AND TO
4 PROVIDE LEAD POISONING SCREENING TO AREAS OF HIGHEST ~~PRIORITY, THAT~~
5 ~~SHALL INCLUDE AREAS~~ RISK, AS IDENTIFIED BY:

6 (1) CENSUS TRACT INFORMATION NOTING AREAS WITH LARGE
7 CONCENTRATIONS OF PRE-1978 HOUSING; AND

8 ~~(2) ADDRESSES OF PREVIOUSLY REPORTED CASES OF ELEVATED~~
9 ~~BLOOD LEAD LEVELS;~~

10 ~~(3)~~ (2) HIGHEST RATES OF LEAD POISONING AS EVIDENCED BY
11 INFORMATION PROVIDED TO AND BY THE CHILDHOOD LEAD REGISTRY
12 ESTABLISHED AND MAINTAINED BY THE DEPARTMENT OF THE ENVIRONMENT; ~~AND~~

13 ~~(4) ANY OTHER AVAILABLE DATA FOR THE IDENTIFICATION OF LEAD~~
14 ~~HAZARDS THAT THE SECRETARY MAY DEEM APPROPRIATE.~~

15 **Article - Family Law**

16 5-556.1.

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

24 5-580.2.

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

32 5-589.1.

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

6

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

3 **Article - Environment**

4 ~~6-821.~~

5 (a) (1) Whenever an owner of an affected property intends to make repairs or
6 perform maintenance work that will disturb the paint on interior surfaces of an affected
7 property, the owner shall make reasonable efforts to ensure that all persons who are not
8 persons at risk are not present in the area where work is performed and that all persons
9 at risk are removed from the affected property when the work is performed.

10 (2) A tenant shall allow access to an affected property, at reasonable times,
11 to the owner to perform any work required under this subtitle.

12 (3) If a tenant must vacate an affected property for a period of 24 hours or
13 more in order to allow an owner to perform work that will disturb the paint on interior
14 surfaces, the owner shall pay the reasonable expenses that the tenant incurs directly
15 related to the required relocation.

16 (b) (1) If an owner has made all reasonable efforts to cause the tenant to
17 temporarily vacate an affected property in order to perform work that will disturb the
18 paint on interior surfaces, and the tenant refuses to vacate the affected property, the
19 owner may not be liable for any damages arising from the tenant's refusal to vacate.

20 (2) If an owner has made all reasonable efforts to gain access to an affected
21 property in order to perform any work required under this subtitle, and the tenant refuses
22 to allow access, even after receiving reasonable advance notice of the need for access, the
23 owner may not be liable for any damages arising from the tenant's refusal to allow access.

24 (c) All hazard reduction treatments required to be performed under this subtitle
25 shall be performed by or under the supervision of personnel accredited under § 6-1002 of
26 this title.

27 (D) NOTWITHSTANDING ANY OTHER PROVISION OF LAW, WORK PRACTICE
28 REQUIREMENTS AND ACCREDITATION REQUIREMENTS ADOPTED UNDER SUBTITLE
29 10 OF THIS TITLE MAY NOT BE REQUIRED FOR REPAIR, MAINTENANCE, OR
30 RENOVATION WORK, OR RISK REDUCTION TREATMENTS IN AFFECTED PROPERTY
31 THAT RESULTS IN DISTURBANCE OF A LEAD CONTAINING SUBSTANCE ON SURFACES
32 INVOLVING 6 SQUARE FEET OR LESS OF SURFACE AREA IN A ROOM, EXCEPT FOR
33 WINDOW REMOVAL OR REPLACEMENT. THE PERSON PERFORMING REPAIR,
34 MAINTENANCE, OR RENOVATION WORK OR RISK REDUCTION TREATMENTS UNDER
35 THIS SUBSECTION SHALL REMOVE ALL VISIBLE DEBRIS FROM THE AFFECTED
36 PROPERTY BEFORE THE PERSON LEAVES THE AFFECTED PROPERTY.

37 ~~6-304.~~

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

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

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

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

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

7 ~~2. Administrative verification to ensure that the unit is treated~~
8 ~~in conformity with the applicable risk reduction standard under § 6-815 or § 6-819 of this~~
9 ~~title.~~

10 ~~[(b) (1) The Secretary shall establish a lead poisoning outreach and education~~
11 ~~program designed to:~~

12 ~~(i) Inform parents of the need to screen their children for lead~~
13 ~~poisoning;~~

14 ~~(ii) Inform parents of the dangers of lead poisoning;~~

15 ~~(iii) Educate parents on how to identify conditions in housing that lead~~
16 ~~to lead poisoning;~~

17 ~~(iv) Educate parents on how to minimize and control lead particulate~~
18 ~~generation and accumulation;~~

19 ~~(v) Teach and inform parents to assess lead hazards from an in-home~~
20 ~~perspective;~~

21 ~~(vi) Teach parents about the nutritional and dietary practices that~~
22 ~~affect lead absorption in children;~~

23 ~~(vii) Instruct parents living in rental property of their rights and~~
24 ~~responsibilities in their relationship with their landlord; and~~

25 ~~(viii) Inform parents of information about lead poisoning and lead~~
26 ~~mitigation for improving the lives of their children.~~

27 ~~(2) The Secretary may contract with outside sources to provide the services~~
28 ~~required by the lead poisoning outreach and education program.]~~

29 SECTION 3. AND BE IT FURTHER ENACTED, That, on or before January 1,
30 1997, the Department of the Environment, in collaboration with the Department of
31 Health and Mental Hygiene, the Office for Children, Youth and Families, the
32 Department of Human Resources, the Department of Housing and Community
33 Development, the Department of Education, ~~and~~ the Department of Budget and Fiscal
34 Planning, and representatives of local health and environmental departments, shall
35 develop and report to the Governor and, subject to § 2-1312 of the State Government
36 Article, to the General Assembly on a statewide plan for coordinated case management
37 and follow-up for children with elevated blood lead levels ~~as defined by regulation.~~ The
38 statewide coordinated plan for case management under this section shall include plans for

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1 coordination among agencies at the local level. Coordinated case management under this
2 Act shall be implemented on or before March 1, 1997.

3 SECTION 4. AND BE IT FURTHER ENACTED, That ~~Sections 1 and 3~~ Section 1
4 of this Act shall take effect October 1, 1996.

5 ~~SECTION 5. AND BE IT FURTHER ENACTED, That Section 2 of this Act shall~~
6 ~~take effect September 30, 2000.~~

7 SECTION 5. AND BE IT FURTHER ENACTED, That this Act is an emergency
8 measure, is necessary for the immediate preservation of the public health and safety, has
9 been passed by a ye and nay vote supported by three-fifths of all of the members elected
10 to each of the two Houses of the General Assembly, and shall take effect from the date it
11 is enacted.