

Department of Legislative Services
Maryland General Assembly
2017 Session

FISCAL AND POLICY NOTE
Third Reader

House Bill 133

(Chair, Environment and Transportation Committee)(By
Request - Departmental - Environment)

Environment and Transportation

Judicial Proceedings

**Environment - Reduction of Lead Risk in Housing - Notification of Elevated
Blood Lead Level**

This departmental bill requires the Secretary of the Environment to assist local governments, if necessary, to provide case management of children with elevated blood lead levels (EBLs) greater than or equal to 10 micrograms per deciliter. The bill also requires the Maryland Department of the Environment (MDE) or a local health department, on receipt of the results of a blood test for lead poisoning indicating that a child younger than age six has an EBL greater than or equal to 10 micrograms per deciliter, to notify (1) the child's parent or legal guardian and (2) if applicable, the owner of the rental dwelling where the child lives. Finally, the bill requires MDE or a local health department, on receiving the results of a blood lead test indicating that a person at risk has an EBL greater than or equal to 10 micrograms per deciliter, to send notice of the test results to (1) a person at risk, or in the case of a minor, the parent or legal guardian of the person at risk and (2) the owner of the affected rental property in which the person at risk resides or regularly spends at least 24 hours per week.

Fiscal Summary

State Effect: The bill is not anticipated to materially affect State operations or finances. The bill's change to the EBL that triggers case management effectively codifies current practice, and MDE advises that it can provide any required notices with existing resources.

Local Effect: The bill does not materially affect local government operations or finances.

Small Business Effect: MDE has determined that this bill has minimal or no impact on small business (attached). The Department of Legislative Services concurs with this assessment.

Analysis

Current Law:

Case Management for Children with Elevated Blood Lead Levels and Related Notifications

Pursuant to existing statute, the Secretary must assist local governments, if necessary, to provide case management of children with EBLs greater than or equal to 15 micrograms per deciliter.

A local health department that receives the results of a blood test for lead poisoning indicating that a child younger than age six has an EBL greater than or equal to 15 micrograms per deciliter and less than 20 micrograms per deciliter must notify the child's parents and, in the case of a child who lives in a rental dwelling unit, the owner of the rental dwelling unit.

In practice, case management, as well as an environmental investigation, is triggered when a child has an EBL greater than or equal to 10 micrograms per deciliter.

Notification of Elevated Blood Lead Level to Person at Risk and Owner of Rental Housing

A local health department that receives the results of a blood lead test indicating that a person at risk has an EBL greater than or equal to 10 micrograms per deciliter on or after February 24, 2006, must notify (1) the person at risk, or in the case of a minor, the parent of the person at risk, of the results of the test and (2) the owner of the affected property in which the person at risk resides or regularly spends at least 24 hours per week, of the results of the test. The notices must be on the forms prepared by MDE and must contain any information required by MDE.

Background:

Lead Poisoning in Children

According to MDE's 2015 [*Childhood Blood Lead Surveillance in Maryland*](#) report, the most recent data available, 127,730 blood lead tests from 120,962 children 0-18 years of age were conducted in 2015. A total of 110,217 children younger than age six were tested out of an estimated statewide population of 535,094. This was an increase of 1,186 children

tested compared to 2014. The estimated population of children 0-72 months of age increased from 2014 by a total of 7,790 children. Of the 110,217 children tested that year, 377 children (or 0.3% of those tested) younger than age six were identified as having a blood lead level of greater than 10 micrograms per deciliter, up from 355 in 2014. Of the 377 cases in 2015, 280 were new cases. An additional 1,789 children had blood lead levels between 5 and 9 micrograms per deciliter, down from 2,004 in 2014. Of those 1,789 cases, 1,388 were new cases. According to MDE, much of the decline in blood lead levels in recent years is the result of implementation and enforcement of Maryland's lead law.

According to the federal Centers for Disease Control and Prevention (CDC), there is no safe level of lead exposure, and adverse health effects exist in children at blood lead levels less than 10 micrograms per deciliter. Since 2012, CDC has urged health care providers and authorities to follow up on any young child with a level as low as 5 micrograms per deciliter. CDC is no longer using the 10 micrograms per deciliter level or referring to a "level of concern." The new reference level of 5 micrograms per deciliter represents the blood lead levels of children (ages 1 through 5) in the highest 2.5 percentiles for blood lead levels.

Maryland 2015 Lead Targeting Plan

In October 2015, the State released the Maryland Targeting Plan for Areas at Risk for Childhood Lead Poisoning (the 2015 targeting plan). The 2015 targeting plan and accompanying proposed regulations called for blood lead testing at 12 months and 24 months of age throughout the State. Previously, only children living in certain at-risk zip codes or who were enrolled in Medicaid were targeted for testing.

State Expenditures: According to MDE, Maryland's Lead Poisoning Prevention Program has well-established case management guidelines and environmental investigation protocols for follow-up of children with EBLs and that blood lead testing that shows an EBL greater than or equal to 10 micrograms per deciliter initiates case management and an environmental investigation. As a result, the bill's statutory change to the EBL at which case management services are provided effectively codifies current practice and does not result in any additional program activity.

Additionally, MDE advises that it currently receives all notices of blood lead testing and sends relevant information to local health departments. The local health departments are then required to mail the required notifications. MDE advises that it can mail the required notices to the affected individuals with existing resources.

Additional Information

Prior Introductions: None.

Cross File: None.

Information Source(s): Baltimore City; Caroline, Montgomery, and Prince George's counties; Maryland Department of the Environment; Department of Health and Mental Hygiene; Centers for Disease Control and Prevention; Department of Legislative Services

Fiscal Note History: First Reader - February 22, 2017
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ANALYSIS OF ECONOMIC IMPACT ON SMALL BUSINESSES

TITLE OF BILL: Environment – Reduction of Lead Risk in Housing – Notification of Elevated Blood Lead Level

BILL NUMBER: HB 133

PREPARED BY: Department of the Environment

PART A. ECONOMIC IMPACT RATING

This agency estimates that the proposed bill:

WILL HAVE MINIMAL OR NO ECONOMIC IMPACT ON MARYLAND SMALL BUSINESS

OR

WILL HAVE MEANINGFUL ECONOMIC IMPACT ON MARYLAND SMALL BUSINESSES

PART B. ECONOMIC IMPACT ANALYSIS

N/A