GOVERNMENT OF THE DISTRICT OF COLUMBIA Department of Health Care Finance



Office of the Senior Deputy Director/Medicaid Director

Transmittal # 20-40

TO: DC Medicaid Pediatric Providers

FROM: Melisa Byrd Senior Deputy Director/State Medicaid Director

DATE: October 30, 2020

SUBJECT: Lead Screening and Reporting Requirements in the District of Columbia

The purpose of this transmittal is to inform DC Medicaid Pediatric Providers of the District's blood lead screening, reporting, and case management requirements and available resources for more information. The Department of Health Care Finance and Department of Energy and Environment jointly issue the attached letter during National Lead Poisoning Prevention Week.

Local and national data on regular pediatric preventive care and chronic disease management among children and families during the Coronavirus Disease 2019 (COVID-19) pandemic suggest delays in care. In this challenging time, it remains critical for pediatric Medicaid beneficiaries to get the full Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services benefit, including routine vaccines, well-child visits (in-person and through telemedicine), and blood lead level screening.

 cc: Medical Society of the District of Columbia DC Hospital Association
DC Primary Care Association
DC Health Care Association
DC Home Care Association
DC Behavioral Health Association
DC Coalition of Disability Service Providers
DC Chapter American Academy of Pediatrics GOVERNMENT OF THE DISTRICT OF COLUMBIA

Department of Energy and Environment Department of Health Care Finance



TO ALL PEDIATRICIANS, FAMILY PRACTITIONERS, HEALTH CLINICS, AND MANAGED CARE ORGANIZATIONS SERVING DC MEDICAID BENEFICIARIES

Re: Lead Screening and Reporting Requirements in the District of Columbia

Dear Health Care Provider:

For Children's Health Month and National Lead Poisoning Prevention Week (October 25–31, 2020), the Department of Energy and Environment (DOEE) and the Department of Health Care Finance (DHCF) are writing to remind you of your legal obligation to perform blood lead level (BLL) screening as part of a well-child visit for all children you serve in the District of Columbia, as outlined below. To review your full responsibilities under the lead screening and reporting law, visit: http://www.dcregs.dc.gov/Gateway/ChapterHome.aspx?ChapterNumber=22-B73.

Screening Requirements

District law requires that every child who resides in the District of Columbia receive a BLL screening test between 6 months and 14 months of age and another BLL screening test between 22 months and 26 months of age, unless an identical test has already been performed in the previous 12 months. Missed opportunities in well-child visits to screen "Every Child, Twice by Two" leave children in the District at risk for serious and irreversible harm from lead exposure. In addition, if a child over 26 months of age has not been tested, the law requires BLL testing at least twice before the child is six years of age.

District law also requires you to screen for lead when a child is at-risk for high-dose lead exposure. Risk indicators include living in or frequently visiting deteriorated or renovated housing built before 1978, which by District law is presumed to include lead-based paint; having a household member who may be exposed to lead at work; or having neurological, behavioral, developmental, or other symptoms consistent with lead exposure.

Reporting Requirements

For laboratories, including health care facilities that use point-of-care devices, District law requires reporting all BLL test results to DOEE within a week. Reports should include venous and capillary BLLs. District law also requires laboratories to report children with an elevated BLL at or above 10 micrograms of lead per deciliter of blood (μ g/dL) **<u>immediately</u>** to DOEE.

For pediatric providers and health care facilities that receive laboratory reports indicating an elevated BLL in a child, District law requires you to inform DOEE within 72 hours. To allow DOEE to take prompt action through case management and risk mitigation for all elevated BLLs, laboratories, providers, and facilities are also asked to <u>report BLL results at or above 5 µg/dL</u> to DOEE immediately. To report an elevated BLL, fax the result to DOEE's secure fax line at (202) 535-2607 or call DOEE at (202) 654-6002.



Follow-up Testing and Case Management

When a child has an elevated BLL, you are legally obligated to provide follow-up BLL testing, treatment, and care. Required care includes case management, such as family education, developmental screening, and referrals for social and environmental services. Under Medicaid's Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services benefit, you are also responsible for providing anticipatory guidance to pregnant women, parents/guardians, and their families about the protective steps they can take to prevent lead exposure. Avoiding even the smallest exposure to lead is critical, since there is no known safe level of exposure. Visit http://doee.dc.gov/node/613342 for helpful guidance you can share with those you serve.

School Health Requirements

The District of Columbia Universal Health Certificate (UHC) requires providers to confirm the two BLL screening test results for children less than six years of age. The UHC must be submitted annually for all children enrolled in child development facilities; Head Start; and public, public charter, private, and parochial schools in the District of Columbia. The UHC is available at https://dcps.dc.gov/page/school-health-requirements.

For questions about lead screening requirements, please contact Colleen Sonosky, Associate Director of DHCF's Division of Children's Health Services, at (202) 557-1625, or Lisa A. Gilmore, Chief of DOEE's Healthy Housing Branch, at (202) 535-2624.

Thank you for all that you continue to do to protect children's health in our nation's capital.

Sincerely

Tommy Wells, Director Department of Energy and the Environment

Wayne Turnage Deputy Mayor of Health and Human Services and Director, Department of Health Care Finance