

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 211 Session of 2019

INTRODUCED BY CRUZ, SCHLOSSBERG, KINSEY, McNEILL, MURT, OTTEN,  
FREEMAN, SCHWEYER, HILL-EVANS AND NEILSON, JANUARY 28, 2019

REFERRED TO COMMITTEE ON HEALTH, JANUARY 28, 2019

AN ACT

1 Providing for lead screening and related services, for health  
2 insurance coverage for lead screening and related diagnostic  
3 services and supplies and for duties of the Department of  
4 Health.

5 The General Assembly of the Commonwealth of Pennsylvania  
6 hereby enacts as follows:

7 Section 1. Short title.

8 This act shall be known and may be cited as the Childhood  
9 Lead Testing and Protection Act.

10 Section 2. Declaration of policy.

11 The General Assembly finds and declares as follows:

12 (1) According to the Centers for Disease Control and  
13 Prevention, at least 4,000,000 households have children  
14 living in them who are being exposed to high levels of lead,  
15 a naturally occurring element that is toxic to humans when  
16 ingested or inhaled.

17 (2) There are approximately 500,000 children in the  
18 United States between one and five years of age with blood  
19 lead levels above five micrograms per deciliter (µg/dL), the

1 reference level at which the Centers for Disease Control and  
2 Prevention recommends public health actions be initiated.

3 (3) Lead poisoning is most detrimental to children under  
4 72 months of age and expectant mothers.

5 (4) The effects of lead poisoning are not reversible.

6 (5) According to the department's 2015 Childhood Lead  
7 Surveillance Annual Report, of the 859,311 children in this  
8 Commonwealth under six years of age, only 140,147 children  
9 were screened for blood lead levels. Of the 140,147 children  
10 tested, 9,643 children had elevated blood lead levels.

11 (6) Complications from lead poisoning include the  
12 following:

13 (i) Developmental delays.

14 (ii) Brain damage.

15 (iii) Nervous system damage.

16 (iv) Memory loss.

17 (v) Abdominal pain.

18 (vi) Aggressive behavior.

19 (vii) Constipation.

20 (viii) Sleep problems.

21 (ix) Headaches.

22 (x) Irritability.

23 (xi) Loss of developmental skills in children.

24 (xii) Loss of appetite.

25 (xiii) Fatigue.

26 (xiv) High blood pressure.

27 (xv) Numbness or tingling in the extremities.

28 (xvi) Anemia.

29 (xvii) Kidney dysfunction.

30 (7) No safe blood lead level in children has been

1 identified.

2 Section 3. Definitions.

3 The following words and phrases when used in this act shall  
4 have the meanings given to them in this section unless the  
5 context clearly indicates otherwise:

6 "Birthing facility." An inpatient or ambulatory health care  
7 facility licensed by the department that provides birthing and  
8 newborn care services.

9 "Blood lead level." A measure of lead in the blood, measured  
10 in micrograms of lead per deciliter of whole blood ( $\mu\text{g/dL}$ ).

11 "Child." A child under 72 months of age who is a resident of  
12 this Commonwealth.

13 "Department." The Department of Health of the Commonwealth.

14 "Diagnostic blood lead level testing." Analysis of a blood  
15 sample to determine quantitative blood lead levels for a sample:

16 (1) Obtained by venipuncture or capillary blood sampling  
17 for the purpose of any of the following:

18 (i) Confirming lead poisoning as a follow-up blood  
19 lead level test.

20 (ii) Diagnosing a child or expectant mother showing  
21 signs or symptoms of lead poisoning.

22 (iii) Diagnosing a child or expectant mother  
23 suspected of having sustained a significant lead  
24 exposure.

25 (2) Analyzed in a laboratory licensed by the department  
26 to perform the testing or in a laboratory of the department.

27 "Diagnostic evaluation." Obtaining and evaluating medical  
28 history information, conducting a physical examination and  
29 diagnostic blood lead level testing, identifying potential  
30 sources of lead exposure and evaluating iron status.

1 "Government program." Any of the following:

2 (1) The children's health care program under Article  
3 XXIII-A of the act of May 17, 1921 (P.L.682, No.284), known  
4 as The Insurance Company Law of 1921.

5 (2) The Commonwealth's medical assistance program  
6 established under the act of June 13, 1967 (P.L.31, No.21),  
7 known as the Human Services Code.

8 "Health care practitioner." As defined in section 103 of the  
9 act of July 19, 1979 (P.L.130, No.48), known as the Health Care  
10 Facilities Act.

11 "Insurance policy." An individual or group health insurance  
12 policy, contract or plan issued by or through an insurer or a  
13 government program that provides medical or health care coverage  
14 by a health care facility or licensed health care provider. The  
15 term does not include accident only, fixed indemnity, limited  
16 benefit, credit, dental, specified disease, Civilian Health and  
17 Medical Program of the Uniformed Services (CHAMPUS) supplement,  
18 long-term care or disability income, workers' compensation or  
19 automobile medical payment insurance.

20 "Insurer." An entity or affiliate entity that issues an  
21 insurance policy that is offered or governed under any of the  
22 following:

23 (1) The act of May 17, 1921 (P.L.682, No.284), known as  
24 The Insurance Company Law of 1921.

25 (2) The act of December 29, 1972 (P.L.1701, No.364),  
26 known as the Health Maintenance Organization Act.

27 (3) The act of May 18, 1976 (P.L.123, No.54), known as  
28 the Individual Accident and Sickness Insurance Minimum  
29 Standards Act.

30 (4) 40 Pa.C.S. Ch. 61 (relating to hospital plan

1 corporations).

2 (5) 40 Pa.C.S. Ch. 63 (relating to professional health  
3 services plan corporations).

4 "Lead poisoning." A blood lead level that meets one of the  
5 following criteria:

6 (1) A confirmed blood lead level greater than or equal  
7 to 20 µg/dL in a child or expectant mother.

8 (2) Two blood lead level samples of a child or expectant  
9 mother, separated by at least 90 days, but not more than 365  
10 days, which indicate a blood lead level greater than or equal  
11 to 15 µg/dL.

12 "Lead screening-related services." Include:

13 (1) Materials and supplies used to obtain blood  
14 specimens for quantitative blood lead level or erythrocyte  
15 protoporphyrin (EP) analysis.

16 (2) Laboratory analysis of submitted samples for  
17 quantitative blood lead level or EP analysis.

18 (3) Evaluation of results obtained from laboratory  
19 analysis of samples submitted for quantitative blood lead  
20 level or EP analysis, as well as related consultation,  
21 referral and follow-up of potentially lead-poisoned children  
22 and expectant mothers.

23 "Screening test." A blood sample obtained either by  
24 venipuncture or capillary blood sampling from an asymptomatic  
25 child or expectant mother not known to be lead poisoned in order  
26 to identify the child or expectant mother's risk of lead  
27 poisoning.

28 Section 4. Screening.

29 (a) General rule.--Screening tests shall be performed in  
30 accordance with the following:

1 (1) Children shall receive a screening test in  
2 accordance with the following schedule:

3 (i) Each child shall be screened at 12 months of age  
4 and 24 months of age.

5 (ii) All children designated as high risk through a  
6 risk assessment evaluation promulgated by the department  
7 shall be screened annually from 12 months of age to 72  
8 months of age.

9 (iii) More frequent screening tests for asymptomatic  
10 children under 72 months of age may be completed upon  
11 recommendation of a health care practitioner.

12 (2) All expectant mothers shall receive a screening test  
13 as part of their prenatal care.

14 (b) Testing methods.--Health care practitioners shall ensure  
15 that screening tests are conducted either by venipuncture or by  
16 capillary blood sampling in accordance with department  
17 regulation.

18 (c) Exception.--If the parent or guardian of a child objects  
19 in writing on the ground that a screening test conflicts with a  
20 religious belief or practice, the screening test under  
21 subsection (a) may not be performed.

22 Section 5. Health insurance coverage.

23 (a) General rule.--An insurance policy shall provide  
24 coverage for all of the following:

25 (1) Screening tests and lead-screening-related services  
26 for children under 72 months of age and expectant mothers.

27 (2) Diagnostic evaluations.

28 (b) Department duties.--The department shall provide the  
29 following services for children under 72 months of age and  
30 expectant mothers who are not covered by a health insurance

1 policy:

2 (1) Screening tests and lead screening-related services.

3 (2) Diagnostic evaluations.

4 (c) Reimbursement.--The department shall not be required to  
5 reimburse third parties for services under subsection (b) that  
6 are not provided by the department.

7 (d) Applicability.--This section shall apply to insurance  
8 policies issued or entered into on or after the effective date  
9 of this section.

10 Section 6. Materials.

11 (a) Educational and instructional materials.--The department  
12 shall distribute readily understandable information and  
13 educational and instructional materials regarding lead  
14 poisoning. The materials shall at a minimum explain the risk  
15 factors associated with lead exposure and emphasize lead  
16 screening and testing procedures, treatment of lead poisoning  
17 and the requirements of this act. The materials shall be  
18 provided to parents of newborns prior to discharge from a  
19 hospital or birthing facility. If the birth takes place in a  
20 setting other than a hospital or birthing facility, the  
21 materials shall be provided by a health care practitioner who  
22 assists at the birth.

23 (b) Acknowledgment statement.--An acknowledgment statement  
24 shall be signed by a parent of a newborn prior to discharge from  
25 a hospital or birthing facility or after a birth that takes  
26 place in a setting other than a hospital or birthing facility.  
27 One copy of the acknowledgment statement shall be given to a  
28 parent and one copy shall remain on file in the hospital or  
29 birthing facility. Copies of acknowledgment statements signed by  
30 parents of newborns in settings other than a hospital or

1 birthing facility shall be kept on file by the health care  
2 practitioner who assists at the birth. The acknowledgment  
3 statement shall be in a form as prescribed by the department.

4 (c) Distribution of materials.--The information and  
5 educational and instructional materials described in subsection  
6 (a) shall be provided without cost by each hospital, birthing  
7 facility or health care practitioner to a parent of each newborn  
8 upon discharge from a hospital or birthing facility or after  
9 births that take place in settings other than a hospital or  
10 birthing facility.

11 (d) Liability.--A hospital, birthing facility or health care  
12 practitioner shall not be civilly or criminally liable for the  
13 action or inaction of a parent with regard to lead exposure  
14 pursuant to materials given to the parent relating to lead  
15 exposure.

16 Section 7. Regulations.

17 The department shall promulgate regulations as necessary to  
18 implement the provisions of this act.

19 Section 8. Effective date.

20 This act shall take effect in 90 days.