

TESTING FOR CHILDHOOD LEAD POISONING

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Senate Bill 31 (S-2) as passed by the Senate

Sponsor: Sen. John Cherry

House Committee: Health Policy

Senate Committee: Health Policy

Complete to 6-21-23

Analysis available at
<http://www.legislature.mi.gov>

SUMMARY:

Senate Bill 31 would amend the Public Health Code to require that children be tested for lead poisoning at certain ages, that the testing be recorded on their certificate of immunization, and that the Department of Health and Human Services (DHHS) develop rules to implement the bill's requirements.

Testing

Beginning January 1, 2024, a physician treating a patient who is a minor (under 18 years of age) would have to test the minor for lead poisoning (or order the test for the minor) at the intervals and using the methods specified by DHHS by rule.

However, this requirement would *not* apply to a minor whose parent, guardian, or person in loco parentis objects to the testing.

Certificate of immunization

A physician who performs a lead poisoning test as described above would have to make an entry of the testing on the minor's certificate of immunization. Beginning January 1, 2024, a certificate of immunization would have to include a space to indicate whether the minor has been tested for lead poisoning.

(Under the code, a certificate of immunization is presented to a person accompanying a child by a health care provider that administers an immunizing agent to the child. The certificate is required to be in a form prescribed by DHHS and must indicate the diseases or infections for which the child has been immunized, the number of doses given, the dates when administered, and whether further immunizations are indicated.)

Rules

DHHS would have to promulgate rules to implement the bill. The rules would have to include at least all of the following:

- A requirement that a minor residing in Michigan be tested at 12 months (one year) of age and 24 months (two years) of age, and a requirement that a minor residing in Michigan be tested between 24 months (two years) of age and 72 months (six years) of age if they have no previous record of the test required by the bill.
- The identification of geographic areas in Michigan that pose a high risk for childhood lead poisoning and a requirement that a minor who is 48 months (four years) of age be tested if they reside in one of those geographic areas.

- Factors to identify a minor who is at high risk for lead poisoning. The factors would at a minimum have to include residing in a home where other minors have been diagnosed with lead poisoning and residing in a home built before 1978.
- A requirement that a minor be tested at intervals determined by DHHS if a physician determines that the minor is at high risk for lead poisoning by applying the factors identified above, through a parent's attestation, or through the physician's own independent medical judgment.
- Procedures for entering testing information on the minor's certificate of immunization as required, including how to enter the information if the testing is performed by a person other than a physician.

In addition, if after collecting and reviewing data on lead poisoning in Michigan for five years DHHS determines that the non-high-risk testing requirements described above (the first bulleted item) are no longer necessary or appropriate to maintain the health and safety of Michigan children, DHHS could adjust the ages in those requirements or eliminate them altogether. If it did so, it would have to submit a report to the legislature detailing its rationale.

MCL 333.9206 and proposed MCL 333.5474d

FISCAL IMPACT:

Senate Bill 31 would have one-time modest fiscal implications for DHHS to carry out the process of promulgation of rules to implement the bill. These costs should be able to be absorbed by the current appropriations for administration and the relevant programs. The bill would have one-time minor fiscal implications for DHHS to modify the existing form of the certificate of immunization. Additionally, there may be minor fiscal implications for DHHS for data collection and review in order to modify or eliminate the testing requirement after five years.

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■ This analysis was prepared by nonpartisan House Fiscal Agency staff for use by House members in their deliberations and does not constitute an official statement of legislative intent.