



Senate Fiscal Agency
P.O. Box 30036
Lansing, Michigan 48909-7536



BILL ANALYSIS

Telephone: (517) 373-5383
Fax: (517) 373-1986

Senate Bill 31 (Substitute S-2 as reported)

Sponsor: Senator John Cherry

Committee: Health Policy

CONTENT

The bill would amend the Public Health Code to require a physician treating a minor to test or order a test for lead poisoning at early ages and require the Michigan Department of Health and Human Services (DHHS) to promulgate specified rules related to the testing for lead poisoning. The bill specifies that its provisions would not apply to a minor whose parent, guardian, or person in loco parentis objected to testing. Additionally, the DHHS could choose to adjust the ages of testing or eliminate the requirement to test for lead poisoning after collecting and reviewing data on lead poisoning for five years, at which time it would have to submit a report to the Legislature detailing its rationale.

MCL 333.9206 et al.

BRIEF RATIONALE

Under Federal law, all children who receive Medicaid coverage are required to test for lead poisoning at the ages of one and two years old.¹ Additionally, if a child is enrolled into Medicaid coverage before they are six years old and did not test at either one or two years old, they are required to take a test before their sixth birthday. According to testimony, Michigan ranked third highest in the nation for elevated blood lead levels in children in 2021. Lead poisoning in children can cause damage to the brain and nervous system, slowed growth and development, learning and behavioral problems, and hearing and speech problems.² Implementing testing for lead poisoning on every child in Michigan would allow parents and doctors to minimize the risk of long-term harm to children not currently covered by Medicaid.

PREVIOUS LEGISLATION

(Please note: This section does not provide a comprehensive account of all previous legislative efforts on the relevant subject matter.)

The bill is similar to House Bill 5365 from the 2019-2020 Legislative Session.

FISCAL IMPACT

The bill would have a minor negative fiscal impact on the DHHS and no impact on local units of government. The DHHS would incur costs as a result of increased administrative activities from promulgating rules to implement the required testing for lead poisoning and then reviewing the rules after five years. The costs would be borne by existing DHHS resources.

Date Completed: 6-8-23

Legislative Analyst: Alex Krabill
Fiscal Analyst: Ellyn Ackerman

¹ Centers for Medicare & Medicaid Services, *Lead Screening*, 2023.

² Centers for Disease Control and Prevention, *Prevent Children's Exposure to Lead*, October 2022.