

FIRST REGULAR SESSION

SENATE BILL NO. 572

91ST GENERAL ASSEMBLY

INTRODUCED BY SENATOR DOUGHERTY.

Read 1st time February 27, 2001, and 1,000 copies ordered printed.

TERRY L. SPIELER, Secretary.

1621L.031

AN ACT

To repeal sections 701.322, 701.326 and 701.328, RSMo 2000, relating to lead poisoning, and to enact in lieu thereof ten new sections relating to the same subject.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Sections 701.322, 701.326 and 701.328, RSMo 2000, are repealed and ten new sections enacted in lieu thereof, to be known as sections 376.1290, 701.322, 701.326, 701.328, 701.340, 701.342, 701.344, 701.346, 701.348 and 701.349, to read as follows:

376.1290. 1. Each entity offering individual and group health insurance policies providing coverage on an expense-incurred basis, individual and group service or indemnity type contracts issued by a health services corporation, individual and group service contracts issued by a health maintenance organization, all self-insured group arrangements, to the extent not preempted by federal law, and all managed health care delivery entities of any type or description that are delivered, issued for delivery, continued or renewed in this state on or after January 1, 2002, shall offer coverage for testing pregnant women for lead poisoning and for all testing for lead poisoning authorized by sections 701.340 to 701.349, RSMo, or by rule of the department of health promulgated pursuant to sections 701.340 to 701.349, RSMo.

2. Health care services required by this section shall not be subject to any greater deductible or co-payment than any other health care service provided by the policy, contract or plan.

3. No entity enumerated in subsection 1 of this section shall reduce or eliminate coverage as a result of the requirements of this section.

EXPLANATION--Matter enclosed in bold-faced brackets [thus] in this bill is not enacted and is intended to be omitted in the law.

4. Nothing in this section shall apply to accident-only, specified disease, hospital indemnity, Medicare supplement, long-term care or other limited benefit health insurance policies.

701.322. Upon request of a physician, health care facility or third-party insurer, the department may provide laboratory services for tests related to contagious or infectious diseases. The department may conduct laboratory testing of blood specimens for lead content on behalf of a physician, hospital, clinic, free clinic, municipality or private organization which cannot secure or provide such services through other sources. The department of health may charge a fee for laboratory services rendered [under] **pursuant to** this section. [Such] Fees **for tests related to contagious or infectious diseases** shall be deposited in a separate account in the Missouri public health services fund, created in section 192.900, RSMo, and funds in such account shall be used to provide laboratory testing services by the department. **Fees for laboratory testing of blood specimens for lead content shall be deposited in the childhood lead testing fund created in section 701.348, RSMo.**

701.326. 1. The department of health shall establish and maintain a lead poisoning information reporting system which shall include a record of lead poisoning cases which occur in Missouri along with the information concerning these cases which is deemed necessary and appropriate to conduct comprehensive epidemiologic studies of lead poisoning in this state and to evaluate the appropriateness of lead abatement programs.

2. The director of the department of health shall promulgate rules and regulations specifying the level of lead poisoning which shall be reported and any accompanying information to be reported in each case. Such information **shall include the patient's address and** may include the patient's name, [address,] diagnosis **(including the blood lead level)**, pathological findings, the stage of the disease, environmental and known occupational factors, method of treatment and other relevant data from medical histories. Reports of lead poisoning shall be filed with the director of the department of health within a period of time specified by the director. The department shall prescribe the form and manner in which the information shall be reported.

3. The attending health care professional of any patient with lead poisoning shall provide to the department of health the information required pursuant to this section.

4. When a case of lead poisoning is reported to the director, the director shall inform such local boards of health, public health agencies, and other persons and organizations as the director deems necessary; provided that, the name of any child contracting lead poisoning shall not be included unless the director determines that such inclusion is necessary to protect the health and well-being of the affected individual.

5. The director shall require all health care professionals or health care organizations required to report blood tests which are positive for lead poisoning

pursuant to sections 701.300 to 701.349 or rules promulgated thereunder to submit a monthly report of all blood tests performed which are negative for lead poisoning. The department shall prescribe by rule the form and manner in which the information shall be reported.

701.328. 1. The department of health shall protect the identity of the patient and physician involved in the reporting required by sections 701.318 to [701.330] **701.349**. Such identity shall not be revealed except that the identity of the patient shall be released only upon written consent of the patient. The identity of the physician shall be released only upon written consent of the physician.

2. The department may release without consent any information obtained pursuant to sections 701.318 to [701.330] **701.349**, including the identities of certain patients or physicians, when the information is necessary for the performance of duties by public employees within, or the legally designated agents of, any state or local agency, department or political subdivision, but only when such employees and agents need to know such information to perform their public duties.

3. The department shall use or publish reports based upon materials reported pursuant to sections 701.318 to [701.330] **701.349** to advance research, education, treatment and lead abatement. **The department shall geographically index the data from lead testing reports to determine the location of areas of relatively high incidence of lead poisoning.** The department shall provide qualified researchers with data from the reported information upon the researcher's compliance with appropriate conditions as provided by rule and upon payment of a fee to cover the cost of processing the data.

701.340. 1. Beginning January 1, 2002, the department of health shall implement a childhood lead testing program which requires every child less than six years of age to be tested for lead poisoning in accordance with the provisions of sections 701.340 to 701.349. In coordination with the department of health, every health care facility serving children less than six years of age, including but not limited to hospitals and clinics licensed pursuant to chapter 197, RSMo, shall take appropriate steps to ensure that their patients receive such lead poisoning testing.

2. The test for lead poisoning shall consist of a blood sample that shall be sent to a state-licensed laboratory for analysis. The department of health shall, by rule, determine the blood test protocol to be used.

3. Any child less than six years of age who is not deemed high risk pursuant to section 701.341 shall be tested once between the ages of nine and twelve months, once at two years of age and annually thereafter until the child is four years of age.

4. Nothing in sections 701.340 to 701.349 shall be construed to require a child to undergo lead testing whose parent or guardian objects to the testing in a written statement that states the parent's or guardian's reason for refusing such testing.

701.342. 1. The department of health, in coordination with the department of social services and the department of elementary and secondary education, shall develop and provide questionnaires for every child to be assessed within three months of birth and at least once a year thereafter until the child is six years of age to determine whether such child is at high risk for lead poisoning. The questionnaire shall follow the recommendations of the Centers for Disease Control and Prevention. The department may modify the questionnaire to broaden the scope of the high-risk category. Local boards or commissions of health may add questions to the questionnaire.

2. If the questionnaire indicates an increased risk of lead poisoning, the child shall be deemed to be at high risk for lead poisoning.

3. Any child deemed to be at high risk for lead poisoning pursuant to this section who resides in housing not undergoing renovation or who meets any additional criteria set by local boards of health shall be tested:

(1) At least once every six months between the ages of six months and three years; and

(2) Annually between the ages of three years and six years.

4. Any child deemed to be at high risk for lead poisoning pursuant to this section who resides in housing currently undergoing renovations shall be tested at least once every three months during the renovation and once after the completion of the renovation.

5. The department may promulgate rules to identify pregnant women who may be at high risk for exposure to lead poisoning, to provide such women with educational materials about the dangers of lead poisoning, to develop a questionnaire to be used to determine whether pregnant women are at high risk for lead poisoning, and to direct physicians to recommend testing and make testing available to pregnant women who are deemed to be at high risk.

6. Any laboratory providing test results for lead poisoning pursuant to sections 701.340 to 701.349 shall notify the department of any child who tests positive for lead poisoning and shall, by rule, establish the methods and intervals of follow-up treatment for such children.

7. When the department is notified of a case of lead poisoning pursuant to subsection 6 of this section, the department shall require the testing of all other children less than six years of age, and any other children or persons at risk, as determined by the director, who are residing or have recently resided in the household of the lead poisoned child.

701.344. The department of health shall have the following duties regarding the

childhood lead testing program:

(1) By January 1, 2002, the department shall develop an educational mailing to be sent to every physician licensed by and practicing in this state informing such physician of the childhood lead testing program and the responsibilities of physicians pursuant to such program;

(2) The department shall apply for, take all steps necessary to qualify for and accept any federal funds made available or allotted pursuant to any federal act or program for state lead poisoning prevention programs. Any moneys received pursuant to this subdivision shall be deposited in the childhood lead testing fund;

(3) The department shall convene a task force to investigate the imposition of a fee on entities manufacturing products containing lead. Within three months of the effective date of sections 701.340 to 701.349, the task force shall report its recommendations to the director of the department of health. Such fees shall be limited to the amount deemed necessary by the director of the department of health for implementation of sections 701.340 to 701.349. Fees collected pursuant to this subdivision shall be deposited in the childhood lead testing fund;

(4) The director of the department of health or the director's designee may, subject to appropriations, contract with a public agency or a university, or collaborate with any agencies, individuals or groups to provide necessary services, develop educational programs, scientific research and organization, and interpret data from lead testing reports;

(5) Beginning January 1, 2003, and every January first thereafter, the department of health shall submit a report evaluating the extent of physician compliance with sections 701.340 to 701.349 to the following committees of the Missouri legislature: senate appropriations committee, senate public health and welfare committee, house appropriations - health and mental health committee and house public health committee.

701.346. 1. Every child care facility, as defined in section 210.201, RSMo, and every child care facility affiliated with a school system, a business organization or a nonprofit organization shall, within thirty days of enrolling a child, require the child's parent or guardian to provide evidence of lead poisoning testing in the form of a statement from the health care professional that administered the test. If there is no evidence of testing, the person in charge of the facility shall provide the parent or guardian with information about lead poisoning and locations in the area where the child can be tested. When a parent or guardian cannot obtain such testing, the person in charge of the facility may arrange for the child to be tested by a local health officer with the consent of the child's parent or guardian. At the beginning of each year of

enrollment in such facility, the parent or guardian shall provide proof of testing in accordance with the provisions of sections 701.340 to 701.349 and any rules promulgated thereunder.

2. No child shall be denied access to education or child care because of failure to comply with the provisions of sections 701.340 to 701.349.

701.348. 1. There is hereby created in the state treasury the "Childhood Lead Fund". The state treasurer shall deposit to the credit of the fund all moneys which may be appropriated to it by the general assembly and also any gifts, contributions, grants, bequests or other aid received from federal, private or other sources related to lead testing, education and screening. The general assembly may appropriate moneys to the fund for the support of the childhood lead testing program established in sections 701.340 to 701.349. The moneys in the fund shall be used to fund the administration of childhood lead programs, including but not limited to funding for the administration of blood tests to uninsured children, educational materials and analysis of lead blood test reports and case management.

2. Notwithstanding the provisions of section 33.080, RSMo, to the contrary, moneys in the fund shall not revert to the credit of the general revenue fund at the end of the biennium.

701.349. The department of health shall promulgate rules to implement the provisions of sections 701.340 to 701.349. No rule or portion of a rule promulgated under the authority of sections 701.340 to 701.349 shall become effective unless it has been promulgated pursuant to chapter 536, RSMo.