

ONE HUNDRED SECOND LEGISLATURE - SECOND SESSION - 2012
COMMITTEE STATEMENT
LB1038

Hearing Date: Tuesday January 31, 2012
Committee On: Education
Introducer: Council
One Liner: Require blood-lead testing prior to school enrollment

Roll Call Vote - Final Committee Action:
Advanced to General File with amendment(s)

Vote Results:

Aye: 8 Senators Adams, Avery, Cornett, Council, Haar, Howard, Seiler, Sullivan

Nay:

Absent:

Present Not Voting:

Proponents:

Senator Brenda Council
Ben Gray
Kara Eastman
Willie Barney
Adi Pour

Jeanee Weiss
John Lindsay

Opponents:

Joann Schaefer
David Buntain

Neutral:

Jeremy Murphy

Representing:

Introducer
African American Achievement Council
Omaha Healthy Kids Alliance
Self
Douglas County Health Department and Douglas County Board of Health
Building Bright Futures
Omaha Public Schools

Representing:

Nebraska Department of Health and Human Services
Nebraska Medical Association

Representing:

Nebraska Catholic Conference

Summary of purpose and/or changes:

Legislative Bill 1038 would require students entering kindergarten in public, private, parochial, and denominational schools after July 1, 2013 to undergo blood-lead testing prior to enrollment. The blood-lead testing requirements proposed in the bill would be governed and administered in a similar manner to immunization requirements. While blood-lead testing would only be required prior to enrollment in kindergarten, the bill contains language that strongly encourages parents and guardians to have their children tested for elevated blood-lead levels between the ages of twelve months and four years. The bill would also require school districts to make diligent efforts to inform parents and guardians of the blood-lead testing requirements contained in the bill, including the desirable age for testing.

For students participating in medicaid or CHIP, the cost of blood-lead testing would be borne by the Department of Health and Human Services using funds appropriated by the Legislature from the Nebraska Health Care Cash Fund. Parents and guardians would bear the cost of blood-lead testing for students not participating in medicaid or CHIP.

The bill provides exceptions from the blood-lead testing requirement for religious or health reasons, or if the student is found to be at low-risk for lead poisoning based on exposure criteria set forth in the bill.

The Department of Health and Human Services would be required to provide information to parents or guardians of children with blood-lead levels at or above ten micrograms per deciliter.

Explanation of amendments:

The committee amendment would strike the original sections and become the bill. The amendment would require the Division of Public Health of the Department of Health and Human Services to establish a lead poisoning prevention program that has the following components:

(a) A coordinated plan to prevent childhood lead poisoning and to minimize exposure of the general public to lead-based paint hazards. Such plan would be required to:

(i) Provide a standard, stated in terms of micrograms of lead per deciliter of whole blood, to be used in identifying elevated blood-lead levels;

(ii) Require that a child be tested for an elevated blood-lead level in accordance with the medicaid state plan as defined in section 68-907 if the child is a participant in the medical assistance program established pursuant to the Medical Assistance Act; and

(iii) Recommend that a child be tested for elevated blood-lead levels if the child resides in a zip code with a high prevalence of children with elevated blood-lead levels as demonstrated by previous testing data or if the child meets one of the criteria included in a lead poisoning prevention screening questionnaire developed by the department; and

(b) An educational and community outreach plan regarding lead poisoning prevention that, at a minimum, would include the development of appropriate educational materials targeted to health care providers, child care providers, public school personnel, owners and tenants of residential dwellings, and parents of young children. The amendment would require such educational materials to be made available to the general public via the department's web site.

The amendment would require the results of all blood-lead level tests conducted in Nebraska to be reported to the department. Upon receiving notice of a child with an elevated blood-lead level as stated in the coordinated plan to prevent childhood lead poisoning and to minimize exposure of the general public to lead-based paint hazards, the department would be required to initiate contact with the local public health department or the physician, or both, of the child with the elevated blood-lead level and offer technical assistance, if necessary.

The amendment would require the department to report to the Legislature by January 1, 2013, and each January 1 thereafter, the number of children from birth through age six who were screened for elevated blood-lead levels during the preceding fiscal year and who were confirmed to have elevated blood-lead levels as stated in the coordinated plan to prevent childhood lead poisoning and to minimize exposure of the general public to lead-based paint hazards. The amendment would require that the report compare such results with those of previous fiscal years and that it identify any revisions to the coordinated plan to prevent childhood lead poisoning and to minimize exposure of the general public to lead-based paint hazards.

The amendment would specify that the department would not be required to pay the cost of elevated-blood-lead-level testing except for children who participate in the medical assistance program established pursuant to the Medical Assistance Act.

Greg Adams, Chairperson