



February 2, 2017

# Montana Healthcare Programs Notice

Physician, Mid-Level, IHS, FQHC, RHC, CHC, Hospitals, Public Health Clinics, Family Planning Clinics, Labs, Head Start, and EPSDT Providers

---

## EPSDT (Children's) Lead Screening Requirements

Lead-poisoning remains one of the most common environmental health problems affecting young children. It is preventable, but it continues to occur in Montana. Even small amounts of lead can adversely affect children's growth and development. Elevated blood lead levels have been linked to developmental disabilities and other serious conditions in children, including reduced IQ, hyperactivity, nervous system, and kidney damage. Children under the age of six are at highest risk.

As part of the definition of Early Periodic Screening Diagnostic and Treatment (EPSDT) services, the Medicaid statute requires coverage for children to include screening blood lead tests appropriate for age and risk factors. Because evidence shows those children eligible for Medicaid may be at higher risk for lead exposure, the Centers for Medicare and Medicaid Services (CMS) requires that all children receive a screening **blood lead test at 12 months and 24 months of age**. Children between the ages of 36 months and 72 months of age must receive a lead screening blood test if they have not been previously screened for lead poisoning. A blood lead test must be used when screening Medicaid-eligible children. Montana Medicaid follows this federal mandate. In addition, Montana covers any follow-up services within the scope of the Federal Medicaid statute, including diagnostic or treatment services determined to be medically necessary.

In 2012, a field study was done between DPHHS Healthy Homes Lead Poisoning Prevention Program and 9 local health departments, it was concluded that 3% of Medicaid enrolled Montana children had Blood Lead Levels (BLL)  $\geq 5$   $\mu\text{g}/\text{dL}$ . One in four of the children had BLL  $\geq 1$   $\mu\text{g}/\text{detected}$ . The highest BLL detected was 34.7 $\mu\text{g}/\text{dL}$ .

Because the symptoms of lead poisoning can go unrecognized in a child, the only way to know if a child is poisoned is to perform a simple blood test. This should be done (or ordered to be done) at the child's Primary Care Provide (PCP) office or at a public health clinic, even if nothing is apparently wrong with the child's health.

According to the current CDC Guidelines, a sample result of 5 $\mu\text{g}/\text{dL}$  or greater is considered an elevated blood lead level. **State reporting rules require all levels at or above 5 $\mu\text{g}/\text{dL}$  to be reported to local public health officials. Public health staff will contact providers regarding follow-up of the patient and possible sources of exposure which may lead to the identification of additional cases or environmental sources.**

The lead test is included on the Bright Futures periodicity schedule, which is the schedule adopted by Montana Medicaid, and can be viewed at <https://brightfutures.aap.org/Pages/default.aspx>. Refer to our website located at <http://medicaidprovider.mt.gov/> for the current fee schedule.

## **Contact Information**

If you have any questions, please contact Katharine Bevan, RN at 406-444-0950 or [kbevan@mt.gov](mailto:kbevan@mt.gov).

For claims questions or additional information, contact Provider Relations at 1-800-624-3958 (toll-free, in/out of state) or 406-442-1837 (Helena) or via e-mail at [MTPRHelpdesk@conduent.com](mailto:MTPRHelpdesk@conduent.com).

Visit the Montana Healthcare Programs Provider Information website at <http://medicaidprovider.mt.gov/>.