HOUSE BILL No. 1229

DIGEST OF INTRODUCED BILL

Citations Affected: IC 16-20-1-23.5; IC 16-41-39.4; IC 20-34-3.

Synopsis: Lead testing. Allows a local health officer to order an environmental inspection of a building in which a child who has an elevated blood lead level has resided for at least six months. Requires a local health department to: (1) identify grants and resources to assist property owners and occupants with lead abatement; and (2) publish the information on the local health department's website. Requires that the guidance developed by the Indiana department of health for health care providers for blood lead level screening for children are consistent with the federal Centers for Disease Control and Prevention guidelines. Amends the requirements for certain health care providers concerning childhood blood lead screening. Removes the expiration date of these provisions. Beginning in the 2025-2026 school year, requires a qualified school to require a child or student who meets specified criteria to receive a blood lead screening test. Provides that a child or student who meets specified criteria may not be initially enrolled in a qualified school unless: (1) the child or student has received a blood lead screening test and documentation of the test is provided to the qualified school; or (2) if the child's parent, student's parent, or student, if the student is an emancipated minor, declines the test, a written explanation for declining the test is provided to the qualified school. Defines "qualified school" for purposes of these provisions.

Effective: January 1, 2025.

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January 9, 2024, read first time and referred to Committee on Public Health.



Second Regular Session of the 123rd General Assembly (2024)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in this style type, and deletions will appear in this style type.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2023 Regular Session of the General Assembly.

HOUSE BILL No. 1229

A BILL FOR AN ACT to amend the Indiana Code concerning health.

Be it enacted by the General Assembly of the State of Indiana:

SECTION 1. IC 16-20-1-23.5 IS ADDED TO THE INDIANA

2	CODE AS A NEW SECTION TO READ AS FOLLOWS
3	[EFFECTIVE JANUARY 1, 2025]: Sec. 23.5. (a) As used in this
4	section, "elevated blood lead level" means a blood lead level of at
5	least five (5) micrograms of lead per deciliter of whole blood.
6	(b) A local health officer may order an environmental inspection
7	of a building in which a child who:
8	(1) is less than six (6) years of age;
9	(2) has been identified as having an elevated blood lead level;
10	and
11	(3) has resided in the building for at least six (6) months;
12	to ensure that the child receives appropriate case management
13	services, including determining whether the child has consumed a
14	food product (such as commercial baby food or food pouches) that
15	may contain lead.
16	(c) A local health department shall:
17	(1) identify grants and other resources to assist property



1	owners and occupants with lead abatement of lead
2	contaminated property; and
3	(2) publish the grant information described in subdivision (1)
4	on the local health department's website.
5	SECTION 2. IC 16-41-39.4-10, AS ADDED BY P.L.80-2022,
6	SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
7	JANUARY 1, 2025]: Sec. 10. (a) The state department shall establish
8	and maintain guidance and standards for health care providers for
9	screening children in Indiana for lead poisoning. blood lead
10	concentration. When developing the guidance and standards, the state
11	department shall consult with the American Academy of Pediatrics.
12	(b) The state department shall make the guidance and standards
13	established under subsection (a) available on the state department's
14	Internet web site. website.
15	(c) The guidance and standards established under this section
16	must be consistent with the federal Centers for Disease Control
17	and Prevention guidelines:
18	(1) establishing a blood lead reference value of three and
19	one-half (3.5) micrograms per deciliter; and
20	(2) recommending a capillary blood lead test result containing
21	at least three and one-half (3.5) micrograms per deciliter be
22	confirmed with a venous blood lead test.
23	(c) This section expires December 31, 2026.
24	SECTION 3. IC 16-41-39.4-11, AS ADDED BY P.L.80-2022,
25	SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
26	JANUARY 1, 2025]: Sec. 11. (a) A health care provider who provides
27	health care services to a child who is less than six (6) years of age shall
28	do the following:
29	(1) Determine whether the child has had a blood lead screening
30	test.
31	(2) If the child has had a blood lead screening test, determine at
32	what age the child was tested and the results of the blood lead
33	screening test, and based on the results of the test, do the
34	following:
35	(A) If the child's blood lead level is less than the blood level
36	reference value established in guidelines developed under
37	section 10 of this chapter, provide a blood lead screening
38	test before the child enrolls in school.
39	(B) If the child's blood lead level is at least the blood level
40	reference value described in clause (A) but less than the
41	maximum blood lead level determined by the American
42	Academy of Pediatrics to require evaluation and



1	intervention, provide a blood lead screening test before the
2	child enrolls in school or within one (1) year after the date
3	on which the provider received the results, whichever
4	comes first.
5	(3) If the child has not had a blood lead screening test and is
6	(A) at least nine (9) months old and
7	(B) less than seventy-two (72) months old and:
8	(A) has lived in an area that is high risk for lead exposure,
9	according to lead risk maps published by the state
10	department, for at least six (6) months;
11	(B) moved to Indiana from another location; or
12	(C) may have consumed a food product, including
13	commercial baby food, that may have contained lead;
14	offer provide a blood lead screening test as soon as practical
15	or refer the child to the local health department for a blood
16	lead poisoning screening in accordance with guidance and
17	standards established by the state department under section 10 of
18	this chapter.
19	(b) Nothing in this section shall be construed to require a parent or
20	guardian to have their child receive a blood lead screening test.
21	However, if a child's parent declines to have their child receive a
22	blood lead screening test, the child's parent shall provide to the
23	health care provider a written and detailed explanation for
24	declining the test, signed by the parent.
25	(c) The child's parent shall provide the written and detailed
26	explanation described in subsection (b) to a school or school
27	corporation when enrolling the child in the school or school
28	corporation.
29	(c) This section expires December 31, 2026.
30	SECTION 4. IC 20-34-3-11, AS AMENDED BY P.L.56-2023,
31	SECTION 187, IS AMENDED TO READ AS FOLLOWS
32	[EFFECTIVE JANUARY 1, 2025]: Sec. 11. (a) The governing body of
33	a school corporation:
34	(1) may; and
35	(2) if section 11.5 of this chapter applies, shall;
36	require students to be tested for blood lead poisoning. concentration.
37	(b) If a student's parent states in writing that the parent is financially
38	unable to pay for a test under this section, the student shall be referred
39	to the a free clinic or public health facility in the area that provides
40	services for indigents.
41	(c) The Indiana department of health and the state board shall adopt
42	joint rules concerning blood lead poisoning concentration testing



1	under this section.
2	(d) Records of all tests administered under this section shall be
3	made and continuously maintained by the Indiana department of health
4	to provide information useful in protecting, promoting, and maintaining
5	the health of students.
6	SECTION 5. IC 20-34-3-11.5 IS ADDED TO THE INDIANA
7	CODE AS A NEW SECTION TO READ AS FOLLOWS
8	[EFFECTIVE JANUARY 1, 2025]: Sec. 11.5. (a) As used in this
9	section, "qualified school" means the following:
0	(1) A public school, including a charter school.
1	(2) An eligible school (as defined in IC 20-51-1-4.7).
2	(b) Beginning in the 2025-2026 school year, a qualified school
3	shall require the following individuals who enroll in the qualified
4	school to receive a blood lead screening test:
5	(1) All children less than six (6) years of age.
6	(2) A student who:
7	(A) has not attended a qualified school; and
8	(B) was previously enrolled in a school other than a
9	qualified school that did not require a blood lead screening
20	test.
1	(3) A student who:
22	(A) has not attended a qualified school; and
23	(B) was previously enrolled in a school that did not have at
.3 .4	least one (1) employee.
25	(c) A qualified school may not allow a child or student to whom
25 26	this section applies to initially enroll in the qualified school unless
27	one (1) of the following requirements is met:
28	(1) The child or student has received a blood lead screening
9	test, and the:
0	(A) child's parent;
1	(B) student's parent, if the student is an unemancipated
2	minor; or
3	(C) student, if the student is an emancipated minor;
4	provides the qualified school with documentation of the blood
5	lead screening test.
6	(2) If the:
7	(A) child's parent;
8	(B) student's parent, if the student is an unemancipated
9	minor; or
-0	(C) student, if the student is an emancipated minor;
-1	declines to receive or have the child or student receive a blood
2	lead screening test, the individual described in clause (A) (R)



or (C) provides a written and detailed explanation for declining the test, signed by the individual.

