## **SENATE BILL No. 615**

#### DIGEST OF INTRODUCED BILL

Citations Affected: IC 16-18-2; IC 16-41-39.5; IC 35-52-16-78.5.

Synopsis: Lead poisoning of children. Requires the state department of health to develop and distribute to primary health care providers a one page informational form that sets forth a series of questions for a child's family concerning the child's exposure to lead and directs a primary health care provider to have a child's blood tested for lead if the child's family gives certain answers to the questions. Requires a primary health care provider who provides well child health care services to a child less than six years of age to recommend a blood lead screening test under certain circumstances and to order a blood lead screening test under certain circumstances. Provides an exception if the parents of the child object to the blood lead screening test on religious grounds. Establishes requirements for blood lead screening tests and confirmatory blood lead screening tests. Requires a clinical laboratory that performs an analysis of the blood of a child for lead to report the results to the state health commissioner (commissioner). Provides that the commissioner, when provided test results showing that a child has a blood lead level of at least five micrograms per deciliter, is required to order a public health lead investigation to determine the source of the child's lead poisoning if the child is less than six years of age, and may order a public health lead investigation if the child is more than six but less than 16 years of age. Provides that the public health lead investigation must include an onsite investigation of the child's residential unit, child care center, or school if the child has a blood lead level of at least 10 micrograms per deciliter. Provides that the commissioner must require a public health lead risk assessment of a child's residential unit, child care center, or school upon determining that the property is a possible source of the child's lead poisoning. (Continued next page)

Effective: July 1, 2019.

### Breaux

January 15, 2019, read first time and referred to Committee on Health and Provider Services.

Digest Continued

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Provides that if the public health lead risk assessment indicates that one or more lead hazards in the residential unit, child care center, or school are contributing to a child's lead poisoning, the commissioner shall issue an order to have each lead hazard controlled. Requires the owner or manager of the residential unit, child care center, or school to choose from among certain acceptable methods to control each lead hazard specified in the commissioner's order. Requires the commissioner to issue a noncompliance order prohibiting the use of the property if the owner or manager of the residential unit, child care center, or school does not comply with the lead hazard control order. Requires the commissioner to lift a lead hazard control order when all lead hazards specified in the control order have been sufficiently controlled.



#### Introduced

First Regular Session of the 121st General Assembly (2019)

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.

Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2018 Regular and Special Session of the General Assembly.

# **SENATE BILL No. 615**

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

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

1	SECTION 1. IC 16-18-2-0.5, AS AMENDED BY P.L.42-2011,
2	SECTION 33, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3	JULY 1, 2019]: Sec. 0.5. (a) "Abatement" or "lead abatement", for
4	purposes of IC 16-41-39.5 and IC 16-41-39.8, means any measure or
5	set of measures designed to permanently eliminate lead-based paint
6	hazards. The term includes the following:
7	(1) The removal of lead-based paint and lead-contaminated dust.
8	(2) The permanent enclosure or encapsulation of lead-based paint.
9	(3) The replacement of lead-painted surfaces or fixtures.
0	(4) The removal or covering of lead-contaminated soil.
1	(5) All preparation, cleanup, disposal, and postabatement
12	clearance testing activities associated with subdivisions (1)
13	through (4).
4	(6) A project for which there is a written contract or other
15	documentation, providing that a person will be conducting



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.

1 activities in or to a residential dwelling or child occupied facility 2 that: 3 (A) will permanently eliminate lead-based paint hazards; or 4 (B) are designed to permanently eliminate lead-based paint 5 hazards as described under subdivisions (1) through (5). 6 (7) A project resulting in the permanent elimination of lead-based 7 paint hazards, conducted by persons certified under 40 CFR 8 745.226 or persons holding valid licenses issued under 9 IC 13-17-14 (before its repeal) or IC 16-41-39.8, unless the project is described under subsection (b) or (c). 10 (8) A project resulting in the permanent elimination of lead-based 11 12 paint hazards, conducted by persons who, through the person's company name or promotional literature, represent, advertise, or 13 14 hold themselves out to be in the business of performing 15 lead-based paint activities, unless those projects are described 16 under subsection (b) or (c). 17 (9) A project resulting in the permanent elimination of lead-based 18 paint hazards that is conducted in response to state or local 19 abatement orders. 20 (b) The term does not include renovation, remodeling, landscaping, 21 or other activities when those activities are not designed to permanently 22 eliminate lead-based paint hazards but are designed to repair, restore, 23 or remodel a structure or dwelling, even though these activities may 24 incidentally result in a reduction or elimination of lead-based paint 25 hazards. 26 (c) The term does not include interim controls, operations, or 27 maintenance activities or other measures designed to temporarily 28 reduce lead-based paint hazards. 29 SECTION 2. IC 16-18-2-54.2 IS ADDED TO THE INDIANA 30 CODE AS A NEW SECTION TO READ AS FOLLOWS 31 [EFFECTIVE JULY 1, 2019]: Sec. 54.2. "Child at risk of lead poisoning", for purposes of IC 16-41-39.5, has the meaning set 32 33 forth in IC 16-41-39.5-1(b). 34 SECTION 3. IC 16-18-2-54.4 IS ADDED TO THE INDIANA 35 CODE AS A NEW SECTION TO READ AS FOLLOWS 36 [EFFECTIVE JULY 1, 2019]: Sec. 54.4. "Child care center", for 37 purposes of IC 16-41-39.5, has the meaning set forth in 38 IC 16-41-39.5-1(c). 39 SECTION 4. IC 16-18-2-56.2, AS AMENDED BY P.L.57-2009, 40 SECTION 5, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE 41 JULY 1, 2019]: Sec. 56.2. "Clearance examination", for purposes of 42 IC 16-41-39.4, means an activity conducted by a clearance examiner

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1 who is licensed under IC 16-41-39.8 to establish proper completion of 2 interim controls (as defined in 24 CFR 35.110). IC 16-41-39.5, has the 3 meaning set forth in IC 16-41-39.5-1(d). 4 SECTION 5. IC 16-18-2-198.4 IS ADDED TO THE INDIANA 5 CODE AS A NEW SECTION TO READ AS FOLLOWS 6 [EFFECTIVE JULY 1, 2019]: Sec. 198.4. (a) "Lead hazard", for 7 purposes of IC 16-41-39.5, has the meaning set forth in 8 IC 16-41-39.5-1(f). 9 (b) "Lead poisoning", for purposes of IC 16-41-39.5, has the 10 meaning set forth in IC 16-41-39.5-1(g). 11 SECTION 6. IC 16-18-2-198.5, AS ADDED BY P.L.57-2009, SECTION 11, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE 12 13 JULY 1, 2019]: Sec. 198.5. "Lead-based paint", for purposes of 14 IC 16-41-39.5 and IC 16-41-39.8, means paint or another surface 15 coating that contains lead in an amount equal to or more than one (1)16 milligram per square centimeter, or in the amount of more than one-half percent (0.5%) by weight. 17 18 SECTION 7. IC 16-18-2-198.8 IS ADDED TO THE INDIANA 19 CODE AS A NEW SECTION TO READ AS FOLLOWS 20 [EFFECTIVE JULY 1, 2019]: Sec. 198.8. (a) "Lead-contaminated 21 dust", for purposes of IC 16-41-39.5, has the meaning set forth in 22 IC 16-41-39.5-1(i). 23 (b) "Lead-contaminated soil", for purposes of IC 16-41-39.5, 24 has the meaning set forth in IC 16-41-39.5-1(j). 25 (c) "Lead-contaminated water pipes", for purposes of IC 16-41-39.5, has the meaning set forth in IC 16-41-39.5-1(k). 26 27 SECTION 8. IC 16-18-2-214.9 IS ADDED TO THE INDIANA 28 CODE AS A NEW SECTION TO READ AS FOLLOWS 29 [EFFECTIVE JULY 1, 2019]: Sec. 214.9. "Manager", for purposes 30 of IC 16-41-39.5, has the meaning set forth in IC 16-41-39.5-1(l). 31 SECTION 9. IC 16-18-2-292.6 IS ADDED TO THE INDIANA 32 CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 292.6. "Primary health care 33 34 provider", for purposes of IC 16-41-39.5, has the meaning set forth 35 in IC 16-41-39.5-1(m). 36 SECTION 10. IC 16-18-2-298.6 IS ADDED TO THE INDIANA 37 CODE AS A NEW SECTION TO READ AS FOLLOWS 38 [EFFECTIVE JULY 1, 2019]: Sec. 298.6. "Public health lead 39 investigation", for purposes of IC 16-41-39.5, has the meaning set 40 forth in IC 16-41-39.5-1(n). 41 SECTION 11. IC 16-18-2-298.7 IS ADDED TO THE INDIANA 42 CODE AS A NEW SECTION TO READ AS FOLLOWS



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1 [EFFECTIVE JULY 1, 2019]: Sec. 298.7. "Public health lead 2 investigator", for purposes of IC 16-41-39.5, has the meaning set 3 forth in IC 16-41-39.5-1(0). 4 SECTION 12. IC 16-18-2-298.9 IS ADDED TO THE INDIANA 5 CODE AS A NEW SECTION TO READ AS FOLLOWS 6 [EFFECTIVE JULY 1, 2019]: Sec. 298.9. "Public health lead risk 7 assessment", for purposes of IC 16-41-39.5, has the meaning set 8 forth in IC 16-41-39.5-1(p). 9 SECTION 13. IC 16-18-2-317.8 IS ADDED TO THE INDIANA 10 CODE AS A NEW SECTION TO READ AS FOLLOWS 11 [EFFECTIVE JULY 1, 2019]: Sec. 317.8. "Residential unit", for purposes of IC 16-41-39.5, has the meaning set forth in 12 13 IC 16-41-39.5-1(q). 14 SECTION 14. IC 16-18-2-323.5 IS ADDED TO THE INDIANA 15 CODE AS A NEW SECTION TO READ AS FOLLOWS 16 [EFFECTIVE JULY 1, 2019]: Sec. 323.5. "School", for purposes of 17 IC 16-41-39.5, has the meaning set forth in IC 16-41-39.5-1(r). 18 SECTION 15. IC 16-41-39.5 IS ADDED TO THE INDIANA 19 CODE AS A NEW CHAPTER TO READ AS FOLLOWS 20 [EFFECTIVE JULY 1, 2019]: 21 Chapter 39.5. Lead Poisoning of Children: Testing and Hazard 22 Abatement 23 Sec. 1. (a) The definitions in this section apply throughout this 24 chapter. 25 (b) "Child at risk of lead poisoning" means a child less than six 26 (6) years of age who meets one (1) or more of the following 27 conditions: 28 (1) Is a Medicaid eligible individual. 29 (2) Lives in a high risk ZIP code, as determined by the state 30 department under section 2(d) of this chapter. 31 (3) Lives in or regularly visits: 32 (A) a residential unit; 33 (B) a child care center; or 34 (C) a school; 35 built before 1950. 36 (4) Lives in or regularly visits a residential unit that: 37 (A) was built before 1978; and 38 (B) contains deteriorated paint. 39 (5) Lives in or regularly visits a residential unit that was built 40 before 1978 and that is being or was recently renovated or 41 remodeled. 42

(6) Is the sibling or playmate of an individual who has or had



1 lead poisoning. 2 (7) Frequently comes in contact with an adult who has a 3 lead-related hobby or occupation. 4 (8) Lives near: 5 (A) an active lead smelter; 6 (B) a battery recycling plant; or 7 (C) another industrial facility known to generate airborne 8 lead dust. 9 (c) "Child care center" has the meaning set forth in 10 IC 12-7-2-28.4. 11 (d) "Clearance examination" means an examination of a 12 residential unit, child care center, or school that includes: 13 (1) a visual assessment; and 14 (2) the collection and analysis of environmental samples; 15 to determine whether the lead hazards in the residential unit, child 16 care center, or school have been sufficiently controlled. 17 (e) "Lead abatement" has the meaning set forth in 18 IC 16-18-2-0.5. 19 (f) "Lead hazard" means the presence in a residential unit, child 20 care center, or school of a condition that is likely to cause the 21 exposure of an individual to lead and thereby endanger the 22 individual's health. 23 (g) "Lead poisoning" means a confirmed level of lead in human 24 blood of at least five (5) micrograms per deciliter. 25 (h) "Lead-based paint" has the meaning set forth in 26 IC 16-18-2-198.5. 27 (i) "Lead-contaminated dust" means surface dust that contains 28 an area or mass concentration of lead at or in excess of the level 29 that is hazardous to human health. 30 (j) "Lead-contaminated soil" means soil that contains lead at or 31 in excess of the level that is hazardous to human health. 32 (k) "Lead-contaminated water pipes" means water pipes 33 containing lead materials resulting in contamination of the water 34 supply with lead at or in excess of the level that is hazardous to 35 human health. 36 (I) "Manager" means an individual who is responsible for the 37 daily operation of a residential unit, child care center, or school. 38 (m) "Primary health care provider" means any individual or 39 entity that provides well child health care services, such as annual 40 examinations and immunizations, to children less than six (6) years 41 of age. The term may include: 42 (1) a licensed physician;



1 (2) an advanced practice nurse licensed under IC 25-23-1; 2 (3) a local health department; and 3 (4) a medical clinic, medical office, or hospital. 4 (n) "Public health lead investigation" means an investigation of 5 a residential unit, child care center, or school for lead hazards that 6 is conducted by a public health lead investigator under section 8 of 7 this chapter. 8 (o) "Public health lead investigator" means an employee or 9 contractor of: 10 (1) the state department; or 11 (2) a local health department to which the state health 12 commissioner has delegated authority under section 7 of this 13 chapter; 14 who is authorized to conduct public health lead investigations and 15 public health lead risk assessments of residential units, child care 16 centers, and schools under this chapter. 17 (p) "Public health lead risk assessment" means an assessment 18 of a residential unit, child care center, or school that is conducted 19 by a public health lead investigator under section 9 of this chapter 20 after the state health commissioner determines that the residential 21 unit, child care center, or school is a possible source of a child's 22 lead poisoning. 23 (q) "Residential unit" means a dwelling or any part of a 24 building being used as an individual's private residence. The term 25 may include a day care center, a preschool, the home of a child 26 care provider, or the home of a relative. 27 (r) "School" means a public or nonpublic school attended by 28 children less than six (6) years of age. 29 Sec. 2. (a) The state department shall develop, print, and 30 distribute to licensed physicians and other primary health care 31 providers a one (1) page informational form about the testing of 32 the blood of Indiana children less than six (6) years of age for the 33 presence of lead. 34 (b) The informational form required by subsection (a): 35 (1) must set forth a series of questions to be answered by a 36 child's family; 37 (2) must include boxes to be checked to indicate whether the 38 family's answer to each question is "yes", "do not know", or 39 "no"; and 40 (3) must include guidance to the primary health care provider 41 as to the action the primary health care provider should take 42 in response to the answers given by a child's family.



(c) The questions and other information must be set forth in the 1 2 informational form in easily readable type, in wording 3 substantially as follows: 4 "BLOOD LEAD TESTING REQUIREMENTS FOR 5 **INDIANA CHILDREN LESS THAN 6 YEARS OF AGE** 6 If the family answers "yes" or "do not know" to any of the 7 questions below, the child's blood must be tested for lead. If 8 the family answers "no" to all of the questions, provide lead 9 poisoning prevention guidance to the family and follow up at 10 the next visit. 11 1. Does the child live in or regularly visit a property built 12 before 1978 that has peeling or chipping paint or that is being 13 or was recently renovated? This includes a child care center, 14 a preschool, or the home of a baby-sitter or relative. If the 15 answer is "yes" or "do not know", the child's blood must be 16 tested. If the answer is "no", go on to number 2. 17 2. Is the child on Medicaid? If the answer is "yes" and the 18 child is less than 3 years old, the child's blood must be tested. 19 If the answer is "yes" and the child is at least 3 and less than 20 6 years old, the child's blood must be tested, regardless of risk 21 factors, if the child has no history of being tested for lead. If 22 the answer is "no", go on to number 3. 23 3. Does the child live in one of the high risk ZIP codes printed 24 on this page? If the answer is "yes", the child's blood must be 25 tested. If the answer is "no", go on to number 4. 26 4. Ask the parent the following six key questions to assess risk. 27 If the answer is "yes" or "do not know" to any of these 28 questions, the child's blood must be tested. 29 Does your child live in or regularly visit a home built before 30 1950? 31 Does your child have a sibling or playmate who has or had 32 lead poisoning? 33 Does your child frequently come in contact with an adult 34 whose hobby or job involves working with lead? (Examples 35 are construction, welding, pottery, painting, and casting 36 ammunition.) 37 Did the child's mother have known exposure to lead during 38 her pregnancy with the child? 39 Is the child or the child's mother an immigrant or refugee? 40 Does your child live near an active or former lead smelter, 41 battery recycling plant, or other industry known to release 42 lead?".



1	(d) In developing the informational form required by subsection
2	(a), the state department, using statistical modeling, shall
3	determine the ZIP code areas of Indiana that fully or partially
4	contain at least one (1) census tract in which at least twelve percent
5	(12%) of the residents less than six (6) years of age are predicted
6	to have blood lead levels of at least five (5) micrograms of lead per
7	deciliter of blood. The state department shall publish the list of
8	these ZIP codes and print the list in the informational form
9	required by subsection (a).
10	Sec. 3. (a) A primary health care provider who provides well
11	child health care services to a child less than six (6) years of age
12	shall do the following:
13	(1) Determine whether the child has had a blood lead
14	screening test.
15	(2) If the child has had a blood lead screening test, determine
16	at what age the child was tested and the results of the blood
17	lead screening test.
18	(3) If the child has not had a blood lead screening test and is
19	at least nine (9) months old and less than seventy-two (72)
20	months old, determine whether the child is a child at risk of
21	lead poisoning.
22	(4) If the child:
23	(A) is less than six (6) years of age and is determined to be
24	a child at risk of lead poisoning; but
25	(B) has not had a blood lead screening test or has had a
26	blood lead screening test of which the results are not
27	available;
28	order a blood lead screening test.
29	(b) A primary health care provider shall recommend that a
30	child at risk of lead poisoning have a blood lead screening test:
31	(1) at the time of the child's one (1) year well child visit and
32	two (2) year well child visit; and
33	(2) annually after the child's two (2) year well child visit, as
34	medically indicated.
35	(c) A primary health care provider who provides well child
36	health care services to a child at risk of lead poisoning shall make
37	a good faith effort to obtain the results of all blood lead screening
38	tests performed on the child at risk of lead poisoning.
39 40	Sec. 4. (a) A blood lead screening test of a child at risk of lead
40	poisoning must be conducted by:
41 42	(1) venous draw of blood; or (2) a conjugation that with the blood collected in a conjugative type
42	(2) a capillary test, with the blood collected in a capillary tube



1 or on filter paper. 2 (b) If: 3 (1) a blood lead screening test of a child at risk of lead 4 poisoning is conducted by a capillary test of blood collected in 5 a capillary tube or on filter paper; and 6 (2) the result is at least five (5) micrograms per deciliter; 7 a confirmatory blood lead screening test of the child by venous 8 collection shall be performed as soon as possible but not more than 9 ninety (90) days after the blood lead screening test conducted by a 10 capillary test. 11 (c) The rules adopted by the state health commissioner under 12 this chapter must provide written guidance for follow-up of 13 elevated blood lead screening test results. 14 Sec. 5. (a) A child at risk of lead poisoning may not be required 15 to undergo a blood lead screening test under this chapter if the 16 parents of the child object to the blood lead screening test on the 17 grounds that it conflicts with their religious tenets and practices. 18 (b) A parent's objection to a blood lead screening test described 19 in subsection (a) shall be documented in the child's medical record. 20 Sec. 6. (a) A clinical laboratory that performs an analysis of the 21 blood of a child less than sixteen (16) years of age who resides in 22 Indiana to detect or determine levels of lead shall report to the 23 state health commissioner, on a form prescribed by the state health 24 commissioner, all of the following information: 25 (1) The child's name and the name of the child's parent or 26 guardian. 27 (2) The child's street address and mailing address, including 28 the city, state, county, and ZIP code. 29 (3) The child's Social Security number, date of birth, gender, 30 race, and ethnicity. 31 (4) A telephone number, with area code, at which the parents 32 or guardians of the child can be reached. 33 (5) The specimen matrix (blood). 34 (6) The analyte (lead). 35 (7) The procedure used to obtain the specimen and the date on 36 which the specimen was obtained. 37 (8) The primary health care provider's: 38 (A) name (if an entity) or first name and last name (if an 39 individual); 40 (B) address; 41 (C) telephone number; and 42

(D) national provider identifier, if applicable.



1 (9) The child's Medicaid number, if any.

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(10) The Clinical Laboratory Improvement Amendments of 1998 (CLIA) number of the laboratory performing the analysis.

(11) The accession number, the date on which the sample was analyzed, and the test result in micrograms per deciliter.

(b) A licensed physician or other primary health care provider
who requests an analysis of the blood of a child who is less than
sixteen (16) years of age and resides in Indiana to detect or
determine the levels of lead in the child's blood shall include with
the request for analysis the information described in subsection
(a)(1) through (a)(9).

(c) A clinical laboratory's report of information to the state
health commissioner as required by subsection (a) must be by
electronic transfer, unless otherwise authorized by the state health
commissioner. A clinical laboratory shall transmit all electronic
information to the state health commissioner under this subsection
not more than seven (7) calendar days after the result of the
analysis is obtained.

(d) Not more than ten (10) calendar days after receiving a blood
lead screening test analysis result reported by a clinical laboratory
under subsection (a) indicating a child's blood lead level of at least
five (5) micrograms per deciliter, the state health commissioner
shall forward the result to the appropriate local health department
to which the state health commissioner has delegated authority
under section 7 of this chapter.

(e) The state health commissioner shall record all children's
blood lead screening test analysis results reported to the state
health commissioner under subsection (a) in the state's
immunization data registry maintained under IC 16-38-5.

Sec. 7. (a) The state health commissioner may delegate to a local
health department the authority, as the state health commissioner's
authorized agent, to conduct public health lead investigations and
public health lead risk assessments of residential units, child care
centers, and schools and to enforce this chapter if the local health
department:

(1) employs or contracts with one (1) or more public health
lead investigators who have been approved by the state health
commissioner; and

40(2) provides the public health lead investigators referred to in41subdivision (1) with the equipment and supplies the state42health commissioner considers necessary for performing the

1	duties of a public health lead investigator.
2	(b) A local health department that accepts the delegation of
3	authority from the state health commissioner under subsection (a)
4	may do the following, as set forth in the order of delegation:
5	(1) Conduct public health lead investigations and public
6	health lead risk assessments, in accordance with this chapter,
7	within the local health department's delegation of authority.
8	(2) Issue and enforce lead hazard control orders within the
9	local health department's delegation of authority, as required
10	by this chapter.
11	(c) A local health department that accepts a delegation of
12	authority from the state health commissioner under subsection (a)
13	shall maintain and make available to the state health commissioner
14	all records relating to work performed under the delegation of
15	authority, along with supporting documentation:
16	(1) for at least six (6) years; or
17	(2) if an audit, litigation, or other action related to the
18	delegation of authority is initiated during the period referred
19	to in subdivision (1), until:
20	(A) the audit, litigation, or other action is concluded and all
21	issues related to the audit, litigation, or other action are
22	resolved; or
23	<b>(B)</b> the period referred to in subdivision (1) expires;
24	whichever is later.
25	(d) A local health department that accepts a delegation of
26	authority from the state health commissioner under subsection (a),
27	if refused admission to a property by the occupant, owner, or
28	manager of the property, may obtain an order from a circuit or
29	superior court of the county in which the property is located
30	authorizing the local health department to enter the property if
31	entering the property is necessary for the local health department
32	to carry out its duties under this chapter.
33	Sec. 8. (a) If the state health commissioner becomes aware that
34	a child less than six (6) years of age has a confirmed blood lead
35	level of at least five (5) micrograms per deciliter, the state health
36	commissioner shall require that a public health lead investigation
37	be conducted under this section to determine the source of the
38	child's lead poisoning.
39	(b) If the state health commissioner becomes aware that a child
40	at least six (6) years of age and less than sixteen (16) years of age
41	has a confirmed blood lead level of at least five (5) micrograms per
42	deciliter, the state health commissioner may require that a public



health lead investigation be conducted under this section to determine the source of the child's lead poisoning.

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3 (c) If a public health lead investigation is conducted under this 4 section in the case of a child who has a blood lead level of at least 5 five (5) micrograms per deciliter but less than ten (10) micrograms 6 per deciliter, the state health commissioner shall require at least 7 the completion of a comprehensive questionnaire, on a form 8 prescribed by the state health commissioner, concerning the child. 9 If the comprehensive questionnaire is completed by someone other 10 than a public health lead investigator, a public health lead 11 investigator must review and approve the questionnaire. The 12 public health lead investigator shall complete and provide a public 13 health lead investigation report, on a form prescribed by the state 14 health commissioner, to the parent or guardian of a child to whom 15 this subsection applies, along with educational materials prescribed 16 by the state health commissioner.

(d) If a public health lead investigation is conducted under this section in the case of a child who has a blood lead level of at least ten (10) micrograms per deciliter, the state health commissioner shall require an onsite investigation of the residential unit in which the child lives, the child care center that the child regularly visits, or the school the child attends. The investigation shall be performed by a public health lead investigator as follows:

(1) The public health lead investigator shall:

25	(A) review known records and reports concerning relevant
26	residential units, child care centers, and schools made by
27	any person licensed under IC 16-41-39.8-3 as a lead-based
28	paint activities inspector, risk assessor, project designer,
29	supervisor, abatement worker, or contractor; and
30	(B) complete a comprehensive questionnaire on a form
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- 31 prescribed by the state health commissioner.
  - (2) Based on the review of known records and reports and the completion of the comprehensive questionnaire under subdivision (1), the public health lead investigator shall do the following, as appropriate:
- 36 (A) Conduct a visual assessment of the residential unit,
  37 child care center, or school, recording findings on a form
  38 prescribed by the state health commissioner.
- 39(B) Perform x-ray fluorescence (XRF) analysis of40deteriorated paint on or in:

(i) interior surfaces, exterior surfaces, and common areas of the residential unit, child care center, or school;

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1and2(ii) attached or unattached structures located within the3same lot line as the residential unit, child care center, or4school, including garages, play equipment, and fences.5(C) Collect other samples of personal property from the6residential unit, child care center, or school, such as glazed7dinnerware, ceramic cookware, toys, and folk remedies,8for analysis as the public health lead investigator considers9necessary to determine a possible source of lead poisoning.10(3) After satisfying the requirements of subdivisions (1) and11(2), the public health lead investigator determines that a13residential unit, child care center, or school is a possible14source of lead poisoning, the public health lead investigator15shall conduct a public health lead risk assessment of the16residential unit, child care center, or school under section179 of this chapter.18(B) If the public health lead investigator's actions under19subdivisions (1) and (2) do not enable the public health lead20investigator to determine whether a residential unit, child21care center, or school is a possible source of lead poisoning,22the public health lead investigator's actions under23subdivisions (1) and (2) do not enable the public health lead20investigator to determine whether a residential unit, child21care center, or school is a possible source of lead poisoning,22the public health l	1	
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23 environmental samples at the residential unit, child care		
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24 center, or school, which may include the following:		· · ·
25 (i) Dust samples for analysis, as appropriate, from		
26 kitchens, bedrooms, living rooms, dining rooms, porches,		
27 and other exterior living areas.		8
28 (ii) Soil samples for analysis, as appropriate, from bare		
29 soil surfaces on play areas, the drip line of the residential		
30 unit, child care center, or school, and the yard of the		
31 residential unit, child care center, or school.		
32 (iii) First draw or flushed water samples for analysis, as		
33 appropriate, from the tap most commonly used for		
34 drinking water, infant formula, or food preparation.		
35 If the results of the analysis of targeted environmental		
36 samples collected under this clause exceed the hazard level		
as established by the state health commissioner, the public		•
38 health lead investigator may conclude that the residential		- ·
39 unit, child care center, or school is a possible source of lead		
40 poisoning and conduct a public health lead risk assessment		
41 of the residential unit, child care center, or school under		
42 section 9 of this chapter. If the results of the analysis of any	42	section 9 of this chapter. If the results of the analysis of any



1 of the targeted environmental samples are below the 2 hazard level established by the state health commissioner, 3 the public health lead investigator may conclude that the 4 residential unit, child care center, or school is not a 5 possible source of the lead poisoning and shall then 6 investigate any other residential unit, child care center, or 7 school that the child regularly visits and that the public 8 health lead investigator reasonably suspects to be a 9 possible source of lead poisoning. 10 (e) At the conclusion of a public health lead investigation under 11 this section, the public health lead investigator shall prepare, in a 12 format prescribed by the state health commissioner, a report 13 containing the following information: 14 (1) The date of the public health lead investigation. 15 (2) The address, unit number, and date of construction of each 16 residential unit, child care center, or school investigated. 17 (3) The name, address, and telephone number of the owner or 18 manager of each residential unit, child care center, or school 19 investigated. 20 (4) The name, license number, and signature of the public 21 health lead investigator conducting the public health lead 22 investigation and, if applicable, the name, address, and 23 telephone number of the local health department of which the 24 public health lead investigator is an employee or contractor. 25 (5) The name, address, and telephone number of each clinical 26 laboratory performing the analysis of any collected samples. 27 (6) The results of the visual assessment of each residential 28 unit, child care center, or school investigated. 29 (7) The testing method and sampling procedure for paint 30 analysis employed and the specific locations of each 31 component tested for the presence of lead. 32 (8) All data collected from onsite testing, including the quality 33 control data. 34 (9) If a residential unit was investigated, the following 35 statement displayed at the top of the report in bold letters: 36 "Federal law (24 CFR Part 35 and 40 CFR Part 745) requires 37 sellers and lessors of residential units constructed prior to 38 1978, except housing for the elderly or persons with 39 disabilities (unless any child who is less than six (6) years of 40 age resides or is expected to reside in such housing) or any 41 zero (0) bedroom dwelling, to disclose and provide a copy of 42 this report to new purchasers or lessees before they become



1 obligated under a lease or sales contract. Property owners and 2 sellers are also required to distribute an educational pamphlet 3 approved by the United States Environmental Protection 4 Agency and include standard warning language in sales 5 contracts or in or attached to lease contracts to ensure that 6 parents have the information they need to protect children 7 from lead-based paint hazards.". 8 (10)Background information concerning physical 9 characteristics and occupant use patterns that may cause lead 10 hazard exposure to one (1) or more children. 11 (11) The results of the lead loading analysis of dust samples, 12 expressed in micrograms per square foot, with the locations 13 where samples were collected indicated on a diagram of the 14 floor plan of each residential unit, child care center, or school 15 investigated. 16 (12) The results of the lead concentration analysis of soil 17 samples, expressed in parts per million, with the locations 18 where samples were collected indicated on a plot plan of each 19 residential unit, child care center, or school investigated. 20 (13) The results of the lead concentration analysis of water 21 samples, expressed in parts per billion. 22 (14) Other sources of lead identified by the public health lead 23 investigator in the child's environment. 24 (15) Any other information required by the state health 25 commissioner. 26 If the public health lead investigation report applies to a child care 27 center or school, the public health lead investigator shall deliver a 28 copy of the report to the parent or guardian of each child less than 29 six (6) years of age who receives child care at the child care center 30 or attends the school. 31 Sec. 9. (a) If the state health commissioner determines that a 32 residential unit, child care center, or school is a possible source of 33 a child's lead poisoning, the state health commissioner shall require 34 that a public health lead risk assessment of that property be 35 conducted under this section. If a public health lead investigator 36 completed one (1) or more of the components of the public health 37 lead risk assessment when conducting a public health lead 38 investigation under section 8 of this chapter within the previous 39 twenty-eight (28) calendar days, the public health lead investigator 40 is not required to repeat those components when conducting the 41 public health lead risk assessment under this section. 42 (b) A public health lead investigation under section 8 of this

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chapter and a public health lead risk assessment of a property under this section may be completed on the same day. Not later than three (3) calendar days after a public health lead risk assessment of a property, the public health lead investigator shall send by regular mail or hand deliver to the owner or manager of the property a written notice stating that the property is suspected of being a possible source of a child's lead poisoning and is the subject of a public health lead risk assessment.

(c) At the conclusion of a public health lead risk assessment, the public health lead investigator shall prepare a report for each residential unit, child care center, or school where the public health lead risk assessment was conducted. The report must be written in a format prescribed by the state health commissioner and must contain the following, as applicable:

(1) The date of the public health lead risk assessment.

(2) The address, unit number, and date of construction of each
 residential unit, child care center, or school assessed.

18 (3) The name, address, and telephone number of the owner or

19 manager of each residential unit, child care center, or school20 assessed.

(4) The name, license number, and signature of the public health lead investigator conducting the public health lead risk assessment and, if applicable, the name, address, and telephone number of the local health department of which the public health lead investigator is an employee or contractor.
(5) The name, address, and telephone number of each clinical laboratory performing the analysis of any collected

28 environmental samples.

29 (6) The results of the visual assessment of each residential
30 unit, child care center, or school assessed.

31 (7) The testing method and sampling procedure for paint
32 analysis employed and the specific locations of each
33 component tested for the presence of lead.

34 (8) All data collected from onsite testing, including quality
35 control data.

36 (9) If a residential unit was the subject of the public health
37 lead risk assessment, the following statement displayed at the
38 top of the report in bold letters:

39 "Federal law (24 CFR Part 35 and 40 CFR Part 745) requires
40 sellers and lessors of residential units constructed prior to
41 1978, except housing for the elderly or persons with
42 disabilities (unless any child who is less than six (6) years of

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1 age resides or is expected to reside in such housing) or any 2 zero (0) bedroom dwelling, to disclose and provide a copy of 3 this report to new purchasers or lessees before they become 4 obligated under a lease or sales contract. Property owners and 5 sellers are also required to distribute an educational pamphlet 6 approved by the United States Environmental Protection 7 Agency and include standard warning language in sales 8 contracts or in or attached to lease contracts to ensure that 9 parents have the information they need to protect children 10 from lead-based paint hazards.". 11 (10)Background information regarding physical 12 characteristics and occupant use patterns that may cause lead 13 hazard exposure to one (1) or more children. 14 (11) The results of the lead loading analysis of dust samples, 15 expressed in micrograms per square foot, with the locations 16 where samples were collected indicated on a diagram of the 17 floor plan of each residential unit, child care center, or school 18 investigated, and a copy of the laboratory report. 19 (12) The results of the lead concentration analysis of soil 20 samples, expressed in parts per million, with the locations 21 where samples were collected indicated on a diagram of each 22 residential unit, child care center, or school assessed, and a 23 copy of the laboratory report. 24 (13) Results of the lead concentration analysis of water 25 samples, expressed in parts per billion, and a copy of the 26 laboratory report. 27 (14) A description of the location and type of lead hazards 28 identified in the residential unit, child care center, or school. 29 (15) A description of recommended control options for each 30 identified lead hazard. 31 (16) A copy of the performance characteristics sheet for the 32 x-ray fluorescence (XRF) instrument used for paint analysis. 33 The report shall be sent by certified mail return receipt requested 34 or hand delivered to all relevant property owners or managers of 35 the residential unit, child care center, or school that is a subject of 36 the public health lead risk assessment within fourteen (14) calendar 37 days after the public health lead investigator receives the 38 laboratory test results. 39 Sec. 10. (a) If the state health commissioner determines, based 40 on a public health lead risk assessment conducted under section 9 41 of this chapter, that one (1) or more lead hazards that exist in a 42 residential unit, child care center, or school are contributing, in



whole or in part, to a child's lead poisoning, the state health 1 2 commissioner shall issue an order to have each lead hazard 3 controlled. The areas of each residential unit, child care center, or 4 school that may be subject to the lead hazard control order 5 include: 6 (1) the interior and exterior surfaces and all common areas of 7 the residential unit, child care center, or school; 8 (2) every attached or unattached structure located within the 9 same lot line as the residential unit, child care center, or 10 school, including garages, play equipment, and fences; and 11 (3) the lot or land that the residential unit, child care center, 12 or school occupies. 13 (b) A lead hazard control order issued under subsection (a) must 14 be in writing and: 15 (1) must specify each lead hazard to be controlled; 16 (2) must specify the date by which the residential unit, child 17 care center, or school must pass a clearance examination 18 demonstrating that each lead hazard has been sufficiently 19 controlled, which must be at least ninety (90) calendar days 20 after the manager of the residential unit, child care center, or 21 school receives the lead hazard control order; and 22 (3) if the state health commissioner determines that the health 23 of the occupants of the residential unit, child care center, or 24 school may be at risk during the work mandated by the lead 25 hazard control order, must require that the occupants be 26 removed from the residential unit, child care center, or school 27 until the residential unit, child care center, or school passes a 28 clearance examination. 29 (c) A lead hazard control order issued under subsection (a) must 30 be: 31 (1) sent by certified mail return receipt requested; or 32 (2) hand delivered; 33 to the manager and the owner (if other than the manager) of the residential unit, child care center, or school that is the subject of 34 35 the lead hazard control order. 36 (d) If a lead hazard control order that was sent under subsection 37 (c)(1) is returned undelivered, the state health commissioner shall 38 resend the lead hazard control order by regular mail. If the lead 39 hazard control order is not returned undelivered within three (3) 40 calendar days after being resent under this subsection, the order is 41 assumed to have been delivered. If the lead hazard control order 42 is returned undelivered after being resent under this subsection,



1 the order is assumed to have been delivered if it is conspicuously 2 posted at the residential unit, child care center, or school that is the 3 subject of the lead hazard control order. 4 (e) The state health commissioner may grant an extension to the 5 date specified under subsection (b)(2). A request for an extension 6 under this subsection must: 7 (1) be in writing; 8 (2) set forth the reasons for the extension request; and 9 (3) describe the measures that have been implemented in the 10 residential unit, child care center, or school to protect against 11 further lead poisoning. 12 (f) If a lead hazard control order applies to a building in which 13 there is more than one (1) residential unit, the state health 14 commissioner shall: 15 (1) have a copy of the order delivered to the occupants of each 16 residential unit in the building; or 17 (2) require that the owner or manager of the building deliver 18 a copy of the order to the occupants of each residential unit in 19 the building. 20 (g) If a lead hazard control order applies to a child care center 21 or school, the state health commissioner shall: 22 (1) deliver; or 23 (2) require the owner or manager of the child care center or 24 school to deliver: 25 a copy of the order to the parent, guardian, or custodian of each child less than six (6) years of age who receives child care at the 26 27 child care center or attends the school. 28 (h) If ownership of a property subject to a lead hazard control 29 order is transferred after the issuance of the lead hazard control 30 order, the property remains subject to the order and the state 31 health commissioner shall treat the individual or entity identified 32 as the transferee in the deed recorded in the county recorder's 33 office after the transfer as the owner of the property. 34 Sec. 11. (a) An owner or manager of a residential unit, child 35 care center, or school that is issued a lead hazard control order 36 under section 10 of this chapter must choose, from the methods 37 listed in subsection (b), a method of controlling each lead hazard 38 specified in the order so that the residential unit, child care center, 39 or school can pass a clearance examination. The control of a lead 40 hazard specified in a lead hazard control order using a control 41 method described in subsection (b)(1), (b)(2), or (b)(3) must be 42 carried out by a person who holds a lead-based paint activities



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1	contractor's license under IC 16-41-39.8-3.
2	(b) The following measures of control for lead hazards are
3	acceptable and shall be applied in accordance with the guidelines
4	of the United States Department of Housing and Urban
5	Development and other applicable federal, state, and local laws:
6	(1) Deterioration of lead-based paint on a nonfriction or
7	nonimpact surface must be controlled by using one (1) or
8	more of the following methods:
9	(A) Removal of the lead-based painted component and
10	replacement with a lead-free component.
11	(B) Paint removal by separation of the lead-based paint
12	from the substrate using a heat gun (operated below one
13	thousand one hundred (1,100) degrees Fahrenheit),
14	chemicals, or certain abrasive measures either onsite or
15	offsite.
16	(C) Enclosure of the lead-based painted component with
17	durable materials. Acceptable durable materials include
18	wallboard, drywall, paneling, siding, coil stock, and the
19	sealing or caulking of edges and joints so as to prevent or
20	control chalking, flaking, peeling, scaling, or loose
21	lead-containing substances from becoming part of house
22	dust or otherwise accessible to children.
23	(D) Encapsulation of the lead-based painted component
24	with a durable surface coating.
25	(E) Any other lead-safe method of permanently stabilizing
26	or removing the lead hazard as approved by the state
27	health commissioner.
28	(2) Deterioration of lead-based paint on friction or impact
29	surfaces shall be controlled by using one (1) or more of the
30	following methods:
31	(A) The removal of the lead-based painted component and
32	replacement with a lead-free component.
33	(B) Lead-based paint removal by separation of the
34 35	lead-based paint from the substrate using a heat gun operated below one thousand one hundred (1,100) degrees
33 36	Fahrenheit, chemicals, or certain abrasive measures, either
30 37	onsite or offsite.
38	(C) Enclosure of impact surfaces with durable materials.
39	Acceptable durable materials include wallboard, drywall,
40	paneling, one-quarter (1/4) inch thick or thicker plywood
40 41	or other underlayment for floors, coil stock, and the
42	sealing or caulking of edges and joints so as to prevent or
• 4	searing of eaching of eages and joints so as to prevent of



1	control challing flating posting costing on losse
1	control chalking, flaking, peeling, scaling, or loose
2 3	lead-containing substances from becoming part of house
	dust or otherwise accessible to children. The underlayment
4 5	for floors must be covered with a cleanable, impermeable
	surface.
6	(D) Any other lead-safe method of permanently removing
7 8	the lead hazard as approved by the state health
8 9	commissioner.
9 10	(E) Either:
10	(i) the immobilization of the friction points; or (ii) the application of a treatment that will prevent
11	(ii) the application of a treatment that will prevent
12	abrasion of the friction surface along with the adoption
	of a written, ongoing maintenance and monitoring schedule.
14	
15 16	(3) Deterioration of lead-based paint on a chewable surface
10	shall be controlled by using one (1) or more of the following methods:
17	
18 19	(A) Removal of the lead-based painted component and
19 20	replacement with lead-free components. (B) Lead-based paint removal by separation of the
20 21	
21 22	lead-based paint from the substrate using a heat gun
22	operated below one thousand one hundred (1,100) degrees
23 24	Fahrenheit, chemicals, or certain abrasive measures, either onsite or offsite.
25 26	(C) Enclosure of the lead-based painted component with a
26 27	material that cannot be penetrated by a child's teeth.
27	(D) Encapsulation of the lead-based painted component by
	coating and sealing of the component with a durable
29 30	surface coating.
30 31	(E) Any other lead-safe method of permanently removing
31 32	the lead hazard as approved by the state health commissioner.
32 33	
33 34	(4) Lead-contaminated dust must be controlled by using one
34 35	(1) or more of the following methods:
33 36	(A) Elimination or control of the source creating the lead-contaminated dust using an appropriate control
30 37	method listed in this subsection followed by specialized
37	cleaning to eliminate the lead-contaminated dust, such as
38 39	by the use of a high efficiency particulate air (HEPA)
39 40	vacuum, wet-mopping, or wet-scrubbing.
40 41	(B) Elimination of the lead-contaminated dust through
42	specialized cleaning when the source creating the
74	specialized cleaning when the source creating the



1	lead-contaminated dust cannot be identified, such as by the
2	use of a high efficiency particulate air (HEPA) vacuum,
3	wet-mopping, or wet-scrubbing.
4	(5) Lead-contaminated soil must be controlled by using one
5	(1) or more of the following methods:
6	(A) Covering of the lead-contaminated bare soil with a
7	permanent covering such as concrete or asphalt.
8	(B) Removal of the top six (6) inches of lead-contaminated
9	bare soil and replacing it with six (6) inches of new soil
10	having a lead concentration of less than four hundred (400)
11	parts per million.
12	(C) Covering of the lead-contaminated soil with an
13	impermanent covering along with the adoption of a
14	written, ongoing maintenance and monitoring schedule.
15	Acceptable impermanent covering includes sod and
16	artificial turf. Gravel and mulch may be used as an
17	impermanent covering if applied at a minimum of six (6)
18	inches in depth.
19	(D) Any other lead-safe method of permanently removing
20	the lead hazard as approved by the state health
20	commissioner.
22	(6) Lead-contaminated water pipes must be controlled using
$\frac{22}{23}$	one (1) or more of the following methods:
24	(A) Removal of plumbing fixtures and replacement with
25	lead-free fixtures.
26	(B) Any other lead-safe method of permanently removing
20	the lead hazard as approved by the state health
28	commissioner.
29	(C) Flushing of water lines that are used for drinking or
30	cooking for at least one (1) minute when water has not
31	been used in the last six (6) hours.
32	(c) The use of the following practices is prohibited as a method
33	of control for lead hazards:
34	(1) Open flame burning or torching.
35	(1) Open name burning of corening. (2) Machine sanding or grinding without a high efficiency
36	particulate air (HEPA) local vacuum exhaust tool.
37	(3) Abrasive blasting or sandblasting without a high efficiency
38	particulate air (HEPA) local vacuum exhaust tool.
39	(4) Use of a heat gun operating above one thousand one
40	hundred (1,100) degrees Fahrenheit.
40	(5) Charring paint.
42	(6) Dry sanding.
74	(v) Dry sanding.



1	(7) Dry scraping, except when done as follows:
2	(A) In conjunction with a heat gun operating at not more
3	than one thousand one hundred (1,100) degrees
4	Fahrenheit.
5	(B) Within one (1) foot of an electrical outlet.
6	(C) To treat defective paint spots totaling not more than
7	two (2) square feet in an interior room or space or twenty
8	(20) square feet on an exterior surface.
9	(8) Uncontained hydroblasting or high-pressure washing.
10	(9) Paint stripping in a poorly ventilated space using a volatile
11	stripper that is considered a hazardous substance under 16
12	CFR 1500.3 or a hazardous chemical under 29 CFR 1910.1200
13	or 29 CFR 1926.59 in the type of work being performed.
14	(d) In addition to or instead of the accepted measures of control
15	for lead hazards identified in subsection (b), upon written
16	determination from the state health commissioner, a property
17	owner or manager may implement reasonable controls of lead
18	hazards through the demolition of a building containing lead
19	hazards. In order to be considered a reasonable control of lead
20	hazards, all demolition efforts must be conducted in a manner that
21	protects human health and the environment and complies with all
22	applicable federal, state, and local laws.
23	(e) A property owner or manager is not required to engage a
24	person who holds a lead-based paint activities contractor's license
25	under IC 16-41-39.8-3 to do the following:
26	(1) Remove mini blinds.
27	(2) Flush water lines that are used for drinking or cooking.
28	(3) If performed by an individual who has completed a
29	training program approved by the state health commissioner,
30	the following:
31	(A) Specialized cleaning not associated with lead
32	abatement.
33	(B) Permanent immobilization of friction points on a
34	window.
35	(C) Covering of lead-contaminated bare soil with an
36	impermanent covering, such as sod, artificial turf, or six
37 38	(6) inches of gravel or mulch.
38 39	(f) The owner or manager of a property subject to a lead hazard control order shall:
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40 41	(1) notify the state health commissioner in writing on a form prescribed by the state health commissioner as to which lead
41 42	hazard control method the owner or manager has chosen to
<b>7</b> 2	hazaru contror memou the owner or manager has chosen to



1	control each lead hazard specified in the lead hazard control
2	order; and
3	(2) send the notification to the state health commissioner by
4	facsimile, electronic mail, or regular mail at least ten (10)
5	business days before the start of the lead hazard control work.
6	If the notification form sent to the state health commissioner
7	indicates that the property owner or manager has chosen a control
8	method described in subsection (b)(1), (b)(2), or (b)(3) to control a
9	lead hazard specified in the lead hazard control order, the
10	notification form must be signed by the person licensed as a
11	lead-based paint activities contractor under IC 16-41-39.8-3 who
12	has been hired to perform the lead hazard control work. The state
13	health commissioner may provide written comments to the
14	property owner or manager within ten (10) calendar days after
15	receiving the notification under this subsection.
16	(g) After each lead hazard specified in a lead hazard control
17	order has been sufficiently controlled, the owner or manager of the
18	property subject to the lead hazard control order shall ensure that
19	the property passes a clearance examination conducted by a person
20	who holds a clearance examiner license under IC 16-41-39.8. The
21	property owner or manager shall submit a copy of the clearance
22	examination report to the state health commissioner.
23	(h) Upon the determination by the state health commissioner
24	that:
25	(1) all lead hazards specified in a lead hazard control order
26	applying to a property have been sufficiently controlled;
27	(2) if applicable, an ongoing maintenance and monitoring plan
28	is in place; and
29	(3) the property has passed a clearance examination
30	conducted by a person who holds a clearance examiner license
31	under IC 16-41-39.8;
32	the state health commissioner shall issue a notice to the property
33	owner or manager that lifts the lead hazard control order.
34	(i) After lifting a lead hazard control order under subsection (h),
35	the state health commissioner shall provide to the owner and
36	manager of the residential unit, child care center, or school to
37	which the lead hazard control order applied information on
38	methods of maintaining control of each lead hazard that was
39	specified in the order. If the order applied to one (1) or more
40	residential units, the state health commissioner or the property
41	owner or manager shall also provide information on lead hazard
42	control methods to the residents of the residential units. If the

order applied to a child care center or school, the state health commissioner or the property owner or manager shall provide information on lead hazard control methods to the parent, guardian, or custodian of each child less than six (6) years of age who receives child care at the child care center or attends the school.

7 Sec. 12. (a) If the owner or manager of a residential unit, child 8 care center, or school to whom a lead hazard control order is 9 issued under section 10 of this chapter does not comply with the 10 lead hazard control order, the state health commissioner shall issue 11 a noncompliance order prohibiting the use of the property subject 12 to the order as a residential unit, child care center, or school. 13

(b) A noncompliance order issued under subsection (a):

14 (1) must state a date as of which the use of the property 15 subject to the order as a residential unit, child care center, or 16 school is prohibited; and

17 (2) remains in effect until the state health commissioner 18 receives evidence that the residential unit, child care center, 19 or school has passed a clearance examination.

20 (c) A property owner or manager who receives a noncompliance 21 order under subsection (a) shall take appropriate measures to 22 notify:

> (1) each occupant of a residential unit in the property to which the order relates; or

(2) the parent, guardian, or custodian of each child who regularly visits the child care center or attends the school;

27 that the residential unit, child care center, or school must be 28 vacated until the residential unit, child care center, or school passes 29 a clearance examination. The owner or manager shall notify each 30 occupant, parent, guardian, or custodian under this subsection at 31 least ten (10) business days before the date stated in the order 32 under subsection (b)(1). 33

(d) After issuing a noncompliance order under subsection (a), the state health commissioner shall post a sign on one (1) or more entrances to the residential unit, child care center, or school to which the order relates. The sign must state that the residential unit, child care center, or school:

(1) has a lead hazard; and

- (2) is unsafe for human occupation, especially for children less than six (6) years of age and pregnant women.
- 41 (e) A sign posted under subsection (d) must remain posted until 42 the state health commissioner determines that the lead hazards in

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1	the residential unit, child care center, or school have been
2	sufficiently controlled and lifts the lead hazard control order under
3	section 11(h) of this chapter.
4	(f) A person who knowingly or intentionally:
5	(1) removes;
6	(2) alters;
7	(3) defaces; or
8	(4) covers;
9	a sign posted on an entrance to a residential unit, child care center,
10	or school under subsection (d) before the lead hazard control order
11	applying to the residential unit, child care center, or school is lifted
12	under section 11(h) of this chapter commits a Class B
13	misdemeanor.
14	Sec. 13. The state health commissioner shall adopt rules under
15	IC 4-22-2 to administer this chapter.
16	SECTION 16. IC 35-52-16-78.5 IS ADDED TO THE INDIANA
17	CODE AS A NEW SECTION TO READ AS FOLLOWS
18	[EFFECTIVE JULY 1, 2019]: Sec. 78.5. IC 16-41-39.5-12(f) defines
19	a crime concerning a sign posted on a property containing lead
20	hazards.

