
THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 749 Session of
2021

INTRODUCED BY CRUZ, BRADFORD, SANCHEZ, SCHLOSSBERG, MERSKI,
HILL-EVANS, SCHWEYER, NEILSON, GUZMAN, BOBACK, HOWARD AND
SIMS, MARCH 3, 2021

REFERRED TO COMMITTEE ON HEALTH, MARCH 3, 2021

AN ACT

1 Providing for lead screening and related services, for health
2 insurance coverage for lead screening and related diagnostic
3 services and supplies and for duties of the Department of
4 Health.

5 The General Assembly of the Commonwealth of Pennsylvania
6 hereby enacts as follows:

7 Section 1. Short title.

8 This act shall be known and may be cited as the Childhood
9 Lead Testing and Protection Act.

10 Section 2. Declaration of policy.

11 The General Assembly finds and declares as follows:

12 (1) According to the Centers for Disease Control and
13 Prevention, at least 4,000,000 households have children
14 living in them who are being exposed to high levels of lead,
15 a naturally occurring element that is toxic to humans when
16 ingested or inhaled.

17 (2) There are approximately 500,000 children in the
18 United States between one and five years of age with blood

1 lead levels above five micrograms per deciliter ($\mu\text{g}/\text{dL}$), the
2 reference level at which the Centers for Disease Control and
3 Prevention recommends public health actions be initiated.

4 (3) Lead poisoning is most detrimental to children under
5 72 months of age and expectant mothers.

6 (4) The effects of lead poisoning are not reversible.

7 (5) According to the department's 2018 Childhood Lead
8 Surveillance Annual Report, of the 847,012 children in this
9 Commonwealth under six years of age, only 160,986 children
10 were screened for blood lead levels. Of the 160,986 children
11 tested, 8,873 children had elevated blood lead levels.

12 (6) Complications from lead poisoning include the
13 following:

14 (i) Developmental delays.

15 (ii) Brain damage.

16 (iii) Nervous system damage.

17 (iv) Memory loss.

18 (v) Abdominal pain.

19 (vi) Aggressive behavior.

20 (vii) Constipation.

21 (viii) Sleep problems.

22 (ix) Headaches.

23 (x) Irritability.

24 (xi) Loss of developmental skills in children.

25 (xii) Loss of appetite.

26 (xiii) Fatigue.

27 (xiv) High blood pressure.

28 (xv) Numbness or tingling in the extremities.

29 (xvi) Anemia.

30 (xvii) Kidney dysfunction.

1 (7) No safe blood lead level in children has been
2 identified.

3 Section 3. Definitions.

4 The following words and phrases when used in this act shall
5 have the meanings given to them in this section unless the
6 context clearly indicates otherwise:

7 "Birthing facility." An inpatient or ambulatory health care
8 facility licensed by the department that provides birthing and
9 newborn care services.

10 "Blood lead level." A measure of lead in the blood, measured
11 in micrograms of lead per deciliter of whole blood ($\mu\text{g}/\text{dL}$).

12 "Child." A child under 72 months of age who is a resident of
13 this Commonwealth.

14 "Department." The Department of Health of the Commonwealth.

15 "Diagnostic blood lead level testing." Analysis of a blood
16 sample to determine quantitative blood lead levels for a sample:

17 (1) Obtained by venipuncture or capillary blood sampling
18 for the purpose of any of the following:

19 (i) Confirming lead poisoning as a follow-up blood
20 lead level test.

21 (ii) Diagnosing a child or expectant mother showing
22 signs or symptoms of lead poisoning.

23 (iii) Diagnosing a child or expectant mother
24 suspected of having sustained a significant lead
25 exposure.

26 (2) Analyzed in a laboratory licensed by the department
27 to perform the testing or in a laboratory of the department.

28 "Diagnostic evaluation." Obtaining and evaluating medical
29 history information, conducting a physical examination and
30 diagnostic blood lead level testing, identifying potential

1 sources of lead exposure and evaluating iron status.

2 "Government program." Any of the following:

3 (1) The children's health care program under Article
4 XXIII-A of the act of May 17, 1921 (P.L.682, No.284), known
5 as The Insurance Company Law of 1921.

6 (2) The Commonwealth's medical assistance program
7 established under the act of June 13, 1967 (P.L.31, No.21),
8 known as the Human Services Code.

9 "Health care practitioner." As defined in section 103 of the
10 act of July 19, 1979 (P.L.130, No.48), known as the Health Care
11 Facilities Act.

12 "Insurance policy." An individual or group health insurance
13 policy, contract or plan issued by or through an insurer or a
14 government program that provides medical or health care coverage
15 by a health care facility or licensed health care provider. The
16 term does not include accident only, fixed indemnity, limited
17 benefit, credit, dental, specified disease, Civilian Health and
18 Medical Program of the Uniformed Services (CHAMPUS) supplement,
19 long-term care or disability income, workers' compensation or
20 automobile medical payment insurance.

21 "Insurer." An entity or affiliate entity that issues an
22 insurance policy that is offered or governed under any of the
23 following:

24 (1) The children's health care program under Article
25 XXIII-A of The Insurance Company Law of 1921.

26 (2) The act of December 29, 1972 (P.L.1701, No.364),
27 known as the Health Maintenance Organization Act.

28 (3) The act of May 18, 1976 (P.L.123, No.54), known as
29 the Individual Accident and Sickness Insurance Minimum
30 Standards Act.

1 (4) 40 Pa.C.S. Ch. 61 (relating to hospital plan
2 corporations).

3 (5) 40 Pa.C.S. Ch. 63 (relating to professional health
4 services plan corporations).

5 "Lead poisoning." A blood lead level that meets one of the
6 following criteria:

7 (1) A confirmed blood lead level greater than or equal
8 to 20 µg/dL in a child or expectant mother.

9 (2) Two blood lead level samples of a child or expectant
10 mother, separated by at least 90 days, but not more than 365
11 days, which indicate a blood lead level greater than or equal
12 to 15 µg/dL.

13 "Lead screening-related services." Include:

14 (1) Materials and supplies used to obtain blood
15 specimens for quantitative blood lead level or erythrocyte
16 protoporphyrin (EP) analysis.

17 (2) Laboratory analysis of submitted samples for
18 quantitative blood lead level or EP analysis.

19 (3) Evaluation of results obtained from laboratory
20 analysis of samples submitted for quantitative blood lead
21 level or EP analysis, as well as related consultation,
22 referral and follow-up of potentially lead-poisoned children
23 and expectant mothers.

24 "Screening test." A blood sample obtained either by
25 venipuncture or capillary blood sampling from an asymptomatic
26 child or expectant mother not known to be lead poisoned in order
27 to identify the child or expectant mother's risk of lead
28 poisoning.

29 Section 4. Screening.

30 (a) General rule.--Screening tests shall be performed in

1 accordance with the following:

2 (1) Children shall receive a screening test in
3 accordance with the following schedule:

4 (i) Each child shall be screened at 12 months of age
5 and 24 months of age.

6 (ii) All children designated as high risk through a
7 risk assessment evaluation promulgated by the department
8 shall be screened annually from 12 months of age to 72
9 months of age.

10 (iii) More frequent screening tests for asymptomatic
11 children under 72 months of age may be completed upon
12 recommendation of a health care practitioner.

13 (2) All expectant mothers shall receive a screening test
14 as part of their prenatal care.

15 (b) Testing methods.--Health care practitioners shall ensure
16 that screening tests are conducted either by venipuncture or by
17 capillary blood sampling in accordance with department
18 regulation.

19 (c) Exception.--If the parent or guardian of a child objects
20 in writing on the ground that a screening test conflicts with a
21 religious belief or practice, the screening test under
22 subsection (a) may not be performed.

23 Section 5. Health insurance coverage.

24 (a) General rule.--An insurance policy shall provide
25 coverage for all of the following:

26 (1) Screening tests and lead-screening-related services
27 for children under 72 months of age and expectant mothers.

28 (2) Diagnostic evaluations.

29 (b) Department duties.--The department shall provide the
30 following services for children under 72 months of age and

1 expectant mothers who are not covered by a health insurance
2 policy:

3 (1) Screening tests and lead screening-related services.

4 (2) Diagnostic evaluations.

5 (c) Reimbursement.--The department shall not be required to
6 reimburse third parties for services under subsection (b) that
7 are not provided by the department.

8 (d) Applicability.--This section shall apply to insurance
9 policies issued or entered into on or after the effective date
10 of this section.

11 Section 6. Materials.

12 (a) Educational and instructional materials.--The department
13 shall distribute readily understandable information and
14 educational and instructional materials regarding lead
15 poisoning. The materials shall at a minimum explain the risk
16 factors associated with lead exposure and emphasize lead
17 screening and testing procedures, treatment of lead poisoning
18 and the requirements of this act. The materials shall be
19 provided to parents of newborns prior to discharge from a
20 hospital or birthing facility. If the birth takes place in a
21 setting other than a hospital or birthing facility, the
22 materials shall be provided by a health care practitioner who
23 assists at the birth.

24 (b) Acknowledgment statement.--An acknowledgment statement
25 shall be signed by a parent of a newborn prior to discharge from
26 a hospital or birthing facility or after a birth that takes
27 place in a setting other than a hospital or birthing facility.
28 One copy of the acknowledgment statement shall be given to a
29 parent and one copy shall remain on file in the hospital or
30 birthing facility. Copies of acknowledgment statements signed by

1 parents of newborns in settings other than a hospital or
2 birthing facility shall be kept on file by the health care
3 practitioner who assists at the birth. The acknowledgment
4 statement shall be in a form as prescribed by the department.

5 (c) Distribution of materials.--The information and
6 educational and instructional materials described in subsection
7 (a) shall be provided without cost by each hospital, birthing
8 facility or health care practitioner to a parent of each newborn
9 upon discharge from a hospital or birthing facility or after
10 births that take place in settings other than a hospital or
11 birthing facility.

12 (d) Liability.--A hospital, birthing facility or health care
13 practitioner shall not be civilly or criminally liable for the
14 action or inaction of a parent with regard to lead exposure
15 pursuant to materials given to the parent relating to lead
16 exposure.

17 Section 7. Regulations.

18 The department shall promulgate regulations as necessary to
19 implement the provisions of this act.

20 Section 8. Effective date.

21 This act shall take effect in 90 days.