

Medicaid, Lead Screening, and ACCLPP

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Presentation Objectives

- History of Medicaid Lead Screening Requirement
- ACCLPP Involvement in Medicaid Screening
- Recent Data on Lead Screening in Medicaid
- Next steps



Medicaid Lead Screening History

- 1991 – CDC policy revised
 - Screen all young children ages 6 – 72 months
 - Measure blood lead levels, not EP
 - Establish 10 ug/dL as level of concern
- 1992 – Medicaid policy updated
 - Screening requires both verbal risk assessment and blood test (either EP or blood lead measurement)
- 1993 – Class action lawsuit settlement results in another Medicaid policy
 - Blood lead measurement adopted as only acceptable test

Medicaid Lead Screening History

- 1997 – CDC policy revised
 - State and local HD recommended to review data and develop own screening plans
 - Screen Medicaid children
 - Default w/o state action is universal screening
- 1998 – Medicaid policy updated
 - All children screened at 1 & 2
 - Screen between 36 – 72 months if no record of screen
 - Blood lead test required – not verbal risk assessment
 - No waivers from screening requirement

ACCLPP and Medicaid Screening

- 1998 and 1999 GAO Reports → ACCLPP Medicaid Workgroup → MMWR
- 2000 and 2001 Requests from Low Prevalence States → Request from Secretary to ACCLPP → Medicaid Targeted Screening Workgroup
- 2002 ACCLPP Recommendations to HHS → Nothing

CMS Form 416

- Due to CMS from States each April
- Summary data on EPSDT services
- Lead screening data required effective in FY1999

FORM HCFA-416: ANNUAL EPSDT PARTICIPATION REPORT

State _____ FY _____		Age Groups							
		Total	<1	1-2*	3-5	6-9	10-14	15-18	19-20
1. Total Individuals Eligible for EPSDT	CN								
	MN								
	Total								
2a. State Periodicity Schedule									
2b. Number of Years in Age Group			1	2	3	4	5	4	2
2c. Annualized State Periodicity Schedule									
3a. Total Months of Eligibility	CN								
	MN								
	Total								
3b. Average Period of Eligibility	CN								
	MN								
	Total								
4. Expected Number of Screenings per Eligible	CN								
	MN								
	Total								
5. Expected Number of Screenings	CN								
	MN								
	Total								
6. Total Screens Received	CN								
	MN								
	Total								
7. Screening Ratio	CN								
	MN								
	Total								

* Includes 12-month visit

Note: "CN" = Categorically Needy, "MN" = Medically Needy

State _____ FY _____		Age Groups							
		Total	<1	1-2*	3-5	6-9	10-14	15-18	19-20
8. Total Eligibles Who Should Receive at Least One Initial or Periodic Screen	CN								
	MN								
	Total								
9. Total Eligibles Receiving at Least One Initial or Periodic Screen	CN								
	MN								
	Total								
10. Participant Ratio	CN								
	MN								
	Total								
11. Total Eligibles Referred for Corrective Treatment	CN								
	MN								
	Total								
12a. Total Eligibles Receiving Any Dental Services	CN								
	MN								
	Total								
12b. Total Eligibles Receiving Preventive Dental Services	CN								
	MN								
	Total								
12c. Total Eligibles Receiving Dental Treatment Services	CN								
	MN								
	Total								
13. Total Eligibles Enrolled in Managed Care	CN								
	MN								
	Total								
14. Total number of Screening Blood Lead Tests	CN								
	MN								
	Total								

* Includes 12-month visit

Note: "CN" = Categorically Needy, "MN" = Medically Needy

1/20/2005

ANNUAL EPSDT PARTICIPATION REPORT

Maryland FY: 2003

		Age Groups								
CAT.		TOTAL	<1	1-2	3-5	6-9	10-14	15-18	19-20	
1.	Total Individuals	CN	454,965	31,702	60,335	77,178	87,912	109,415	68,093	20,330
	Eligible for EPSDT	MN	27,311	251	2,963	4,893	5,261	6,311	5,189	2,443
		TOTAL	482,276	31,953	63,298	82,071	93,173	115,726	73,282	22,773
2a.	State Periodicity Schedule		6	4	3	4	5	4	2	
2b.	Number of Years in Age Group		1	2	3	4	5	4	2	
2c.	Annual State Periodicity Sched.		6.00	2.00	1.00	1.00	1.00	1.00	1.00	
3A.	Total Months of Eligibility	CN	4,480,556	192,660	610,821	796,039	909,321	1,135,531	680,582	155,602
		MN	311,103	5,652	41,597	53,781	57,570	71,089	56,673	24,741
		TOTAL	4,791,659	198,312	652,418	849,820	966,891	1,206,620	737,255	180,343
3B.	Average Period of Eligibility	CN	0.82	0.51	0.84	0.86	0.86	0.86	0.83	0.64
		MN	0.95	1.88	1.17	0.92	0.91	0.94	0.91	0.84
		TOTAL	0.83	0.52	0.86	0.86	0.86	0.87	0.84	0.66
4.	Expected Number of Screenings per Eligible	CN	3.06	1.68	0.86	0.86	0.86	0.86	0.83	0.64
		MN	11.28	2.34	0.92	0.91	0.94	0.91	0.84	
		TOTAL	7.14	2.00	0.89	0.89	0.90	0.87	0.74	
5.	Expected Number of Screenings	CN	503,973	97,008	101,363	66,373	75,604	94,097	56,517	13,011
		MN	31,760	2,831	6,933	4,502	4,788	5,932	4,722	2,052
		TOTAL	535,733	99,839	108,296	70,875	80,392	100,029	61,239	15,063
6.	Total Screens Received	CN	378,986	93,027	116,617	51,765	38,416	48,365	26,352	4,444
		MN	19,862	2,168	6,101	3,336	2,354	2,848	2,215	840
		TOTAL	398,848	95,195	122,718	55,101	40,770	51,213	28,567	5,284
7.	Screening Ratio	CN	0.75	0.96	1.00	0.78	0.51	0.51	0.47	0.34
		MN	0.63	0.77	0.88	0.74	0.49	0.48	0.47	0.41
		TOTAL	0.74	0.95	1.00	0.78	0.51	0.51	0.47	0.35

ALLIANCE FOR HEALTHY HOMES

Protecting Children from Lead and Other Environmental Health Hazards



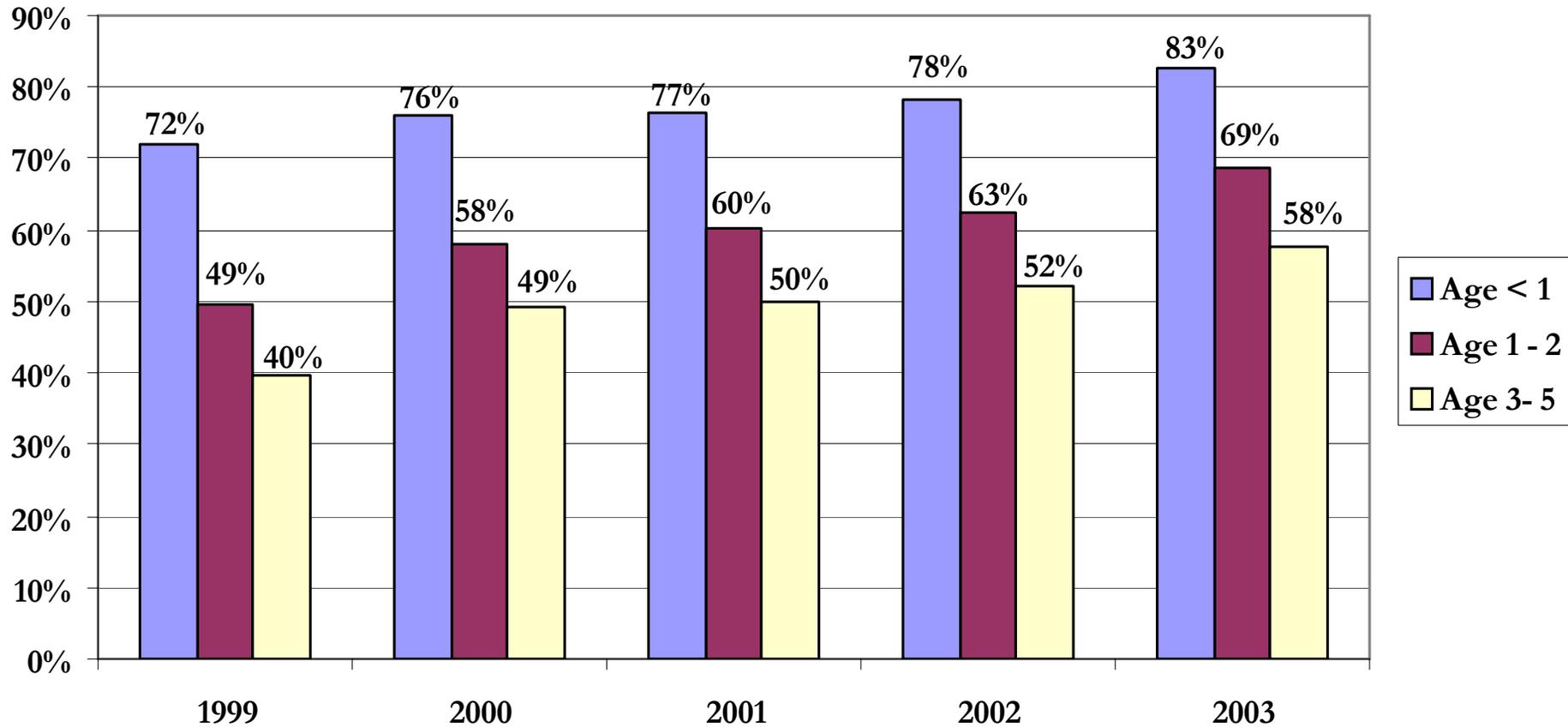
Stuck in Neutral

**States Neglect Lead Testing Duty
to Children Served by Medicaid**

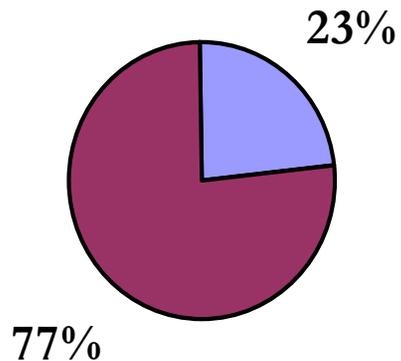


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Percentage of Children Receiving At Least One EPSDT Screen

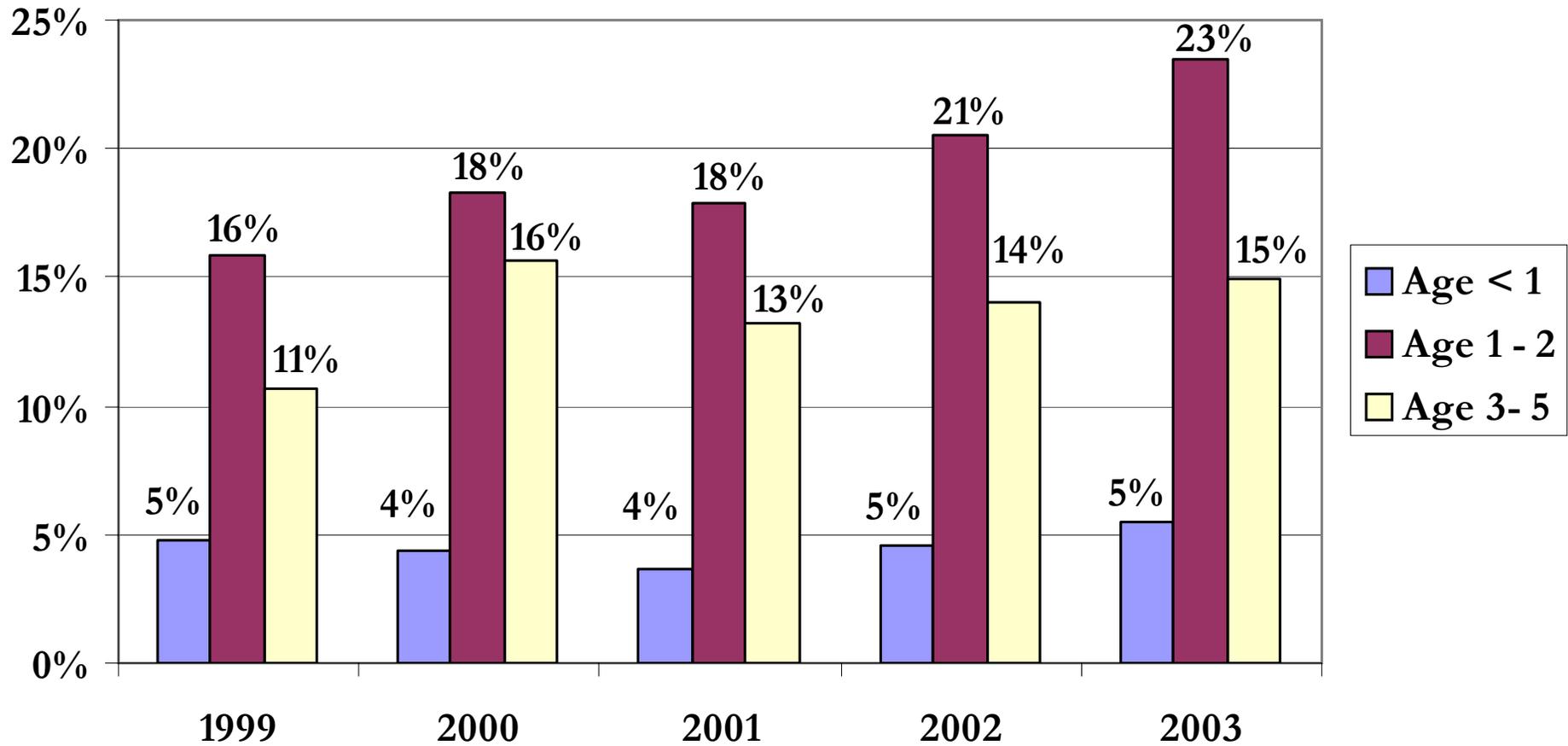


FY 2003 Percentage of Medicaid Children Screened for Lead Exposure -- Ages 1 and 2

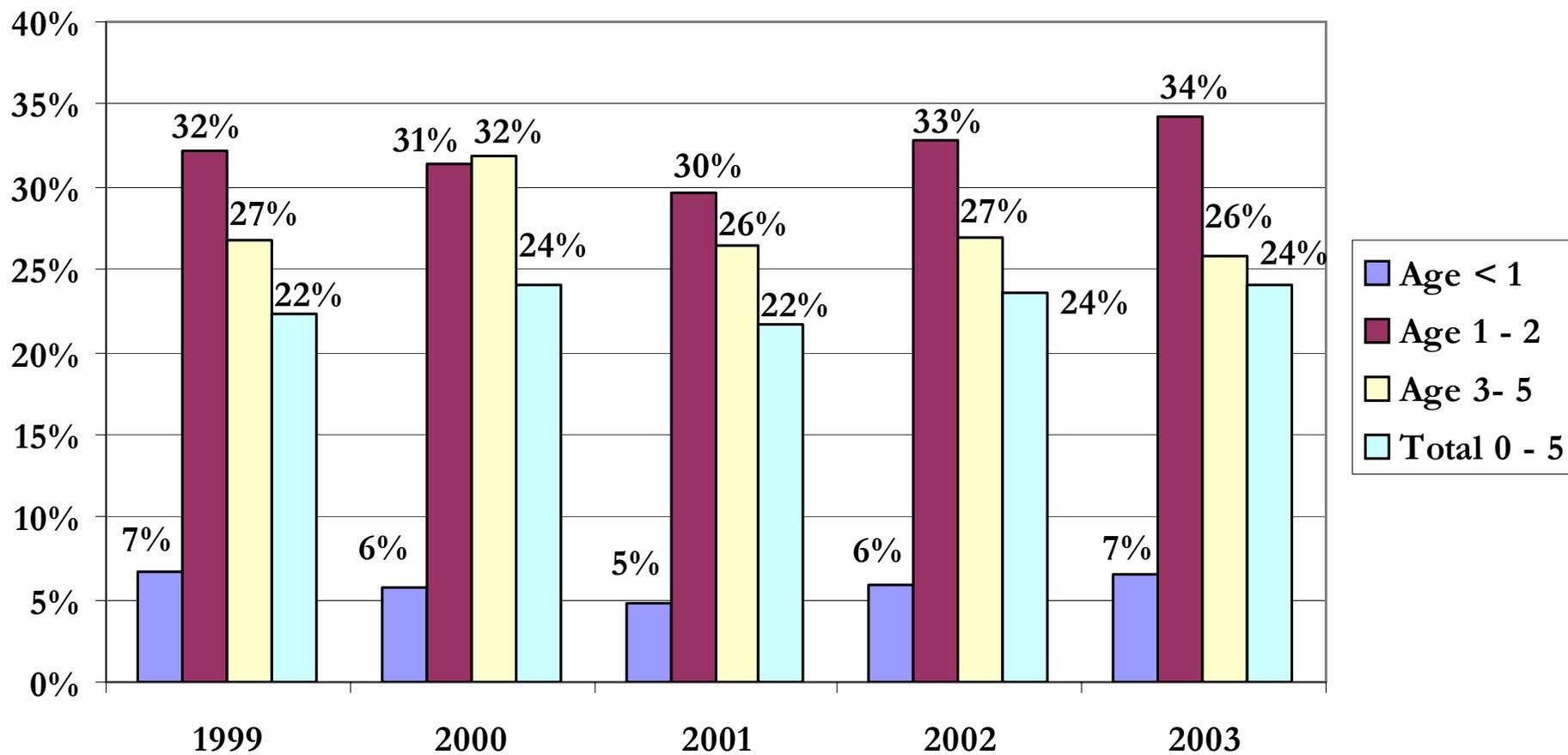


- Received lead screening test
- Not screened for lead exposure

Percentage of Enrolled Children Receiving Blood Lead Screening Test - By Age Group



Percentage of Children Receiving EPSDT Screening Services Who Received Lead Screening Test



Limitations

- Data are entirely self-reported
- States may have difficulty collecting data from managed care organizations and laboratories that provide services under contract to the state Medicaid agency
- Hard to assess whether apparent changes in screening reflect actual change in service delivery or anomalies in data reporting, including age classification issues
- Limited use for trend analysis since not all states' forms are included for every year, and especially since data for some large states is missing for some years (e.g., New York, Texas).
- Do not show what services were delivered to individual children

Discussion

- Some states claim that the Form 416 data under-represents their actual screening performance for various reasons
- Accurate data needed for successful screening programs
- Form 416 reporting requirement for lead now in place since FY 1999

AFHH Recommendations

- 1) Put CDC in Charge of Medicaid Lead Screening
- 2) SMAs Should Adapt Lead Screening Strategies Proven Effective In Other States
- 3) Give CDC Badly-Needed Resources for Lead Poisoning Prevention

Next steps for ACCLPP?

