

ALLIANCE FOR HEALTHY HOMES

Protecting Children from Lead and Other Environmental Health Hazards



FOR IMMEDIATE RELEASE

August 26, 2005

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States Fail to Meet Lead Testing Duty to Children Served by Medicaid

WASHINGTON—New data confirm that states are failing to test children served by Medicaid for lead poisoning as required by federal law. Efforts to improve lead screening rates for these high-risk children are yielding barely detectable progress in most states.

The Alliance for Healthy Homes has completed a new analysis of state data on lead screening services provided to children eligible for Medicaid, who are legally entitled to lead tests and who are considered at high risk for lead poisoning as a group. The analysis is contained in a report, **“Stuck in Neutral: States Neglect Lead Testing Duty to Children Served by Medicaid.”** The report examines data gathered from forms submitted annually by state Medicaid agencies to the Centers for Medicare and Medicaid Services (CMS) at the Department of Health and Human Services.

Key findings include:

- Most one- and two-year-old children served by Medicaid are not receiving required lead screening tests. Only about 24 percent of Medicaid-enrolled children in the 1 to 2-year-old age group received a lead blood test in FY 2003.
- The problem is not that children in Medicaid do not receive regular preventive care. Instead, Medicaid-enrolled children who go to the doctor are still not receiving the required lead test. Only 34 percent of children aged 1 to 2 years who received preventive medical care also received a lead test.

"The states are not doing their jobs," said Eileen Quinn, Interim Director of the Alliance for Healthy Homes. "It is clear that most lead-poisoned children enrolled in Medicaid are still unlikely to be diagnosed, which means that nothing will be done to control the lead hazards that poisoned them."

Lead exposure in young children can cause brain damage, learning difficulties, reduced IQ, behavior problems, hearing loss, and a wide range of other mental and physical problems. Children are exposed to lead primarily through ingestion of lead paint dust and paint chips in poorly maintained older housing or in homes where paint is disturbed through remodeling or

renovation. A variety of other environmental sources of lead, including soil contaminated by exterior paint or past use of leaded gasoline and lead-containing consumer products, may also contribute to exposures. Lower-income children such as those enrolled in Medicaid are at significantly higher risk for lead poisoning than the general population.

To improve lead screening for children at highest risk and address lead hazards before they poison additional children, the Alliance recommends the following three steps:

1. **Put CDC in charge of Medicaid lead screening**—The Secretary of Health and Human Services should charge the Centers for Disease Control and Prevention (CDC) with reviewing current Medicaid policy and practice for lead poisoning and developing a set of remedial action steps to be taken by CMS and state Medicaid agencies.
2. **States should adopt lead screening strategies proven effective in other states**—State Medicaid agencies should review the screening performance of health care providers and provide specific feedback on lead screening rates, and states should consider using monetary incentives or disincentives to reinforce lead screening performance.
3. **Provide CDC with needed resources for lead poisoning prevention**—Funding for CDC’s Lead Poisoning Prevention Branch should be increased from \$36 million to \$60 million to reflect expanded leadership responsibility for lead elimination, primary prevention, and the proposed Medicaid screening supervision.

For more in-depth analysis and information on state Medicaid screening rates, visit www.afhh.org/res/res_pubs/stuck_in_neutral_082605.pdf.

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The Alliance for Healthy Homes is a national public interest organization working to protect children from lead and other environmental health hazards in and around their homes by advocating for policy solutions and building capacity for primary prevention in communities throughout the U.S. Founded in 1990 as the Alliance To End Childhood Lead Poisoning, in 2001 we expanded our work on lead poisoning prevention to address other housing-related health hazards.