

SENATE, No. 837

STATE OF NEW JERSEY 219th LEGISLATURE

PRE-FILED FOR INTRODUCTION IN THE 2020 SESSION

Sponsored by:

Senator JOSEPH A. LAGANA

District 38 (Bergen and Passaic)

SYNOPSIS

Requires health insurance companies to cover lead screenings for children 16 years of age or younger.

CURRENT VERSION OF TEXT

As reported by the Senate Health, Human Services and Senior Citizens Committee with technical review.



S837 LAGANA

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1 AN ACT concerning health insurance coverage for lead screenings for
2 children 16 years of age or younger, amending P.L.1995, c.316
3 and P.L.1995, c.328.
4

5 **BE IT ENACTED** by the Senate and General Assembly of the State
6 of New Jersey:
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8 1. Section 7 of P.L.1995, c.316 (26:2-137.1) is amended to read
9 as follows:

10 7. The Department of Health shall specify by regulation,
11 pursuant to the "Administrative Procedure Act," P.L.1968, c.410
12 (C.52:14B-1 et seq.):

13 a. The lead screening requirements provided for under P.L.1995,
14 c.316 (C.17:48E-35.10 et al.), including the age of the child when
15 initial screening should be conducted, the time intervals between
16 screening, when follow-up testing is required, the methods that shall
17 be used to conduct the lead screening, and, in accordance with the
18 latest recommendations of the federal Centers for Disease Control
19 and Prevention and the provisions of P.L.1995, c.328 (C.26:2-137.2
20 et seq.), the level of lead in the bloodstream that shall necessitate the
21 undertaking of responsive action. Any regulations adopted pursuant
22 to this subsection shall be consistent with the provisions of P.L.1995,
23 c.328 (26:2-137.2 et seq.); and

24 b. The childhood immunizations recommended by the Advisory
25 Committee on Immunization Practices of the United States Public
26 Health Service and the Department of Health.
27 (cf: P.L.2017, c.7, s.2)
28

29 2. Section 3 of P.L.1995, c.328 (C.26:2-137.4) is amended to
30 read as follows:

31 3. a. A physician or registered professional nurse, as
32 appropriate, shall perform lead screening on each patient **[under six]**
33 16 years of age or younger to whom the physician or registered
34 professional nurse provides health care services, unless the physician
35 or registered professional nurse has knowledge that the child has
36 already undergone lead screening in accordance with the
37 requirements of this act. If the physician, registered professional
38 nurse, or an authorized staff member cannot perform the required
39 lead screening, the physician or registered professional nurse may
40 refer the patient, in writing, to another physician, registered
41 professional nurse, health care facility, or designated agency or
42 program which is able to perform the lead screening.

43 b. A health care facility that serves children and is licensed
44 pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.), and any other
45 agency or program that serves children and is designated by the

EXPLANATION – Matter enclosed in bold-faced brackets **[thus]** in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

1 commissioner to perform lead screening, shall perform lead
2 screening on each child **【under six】** 16 years of age or younger that
3 the facility, agency, or program serves, unless the facility, agency, or
4 program has knowledge that the child has already undergone lead
5 screening in accordance with the requirements of this act. If the
6 health care facility, agency, or program cannot perform the required
7 lead screening, the facility, agency, or program may refer the patient,
8 in writing, to another health care facility, physician, registered
9 professional nurse, or other designated agency or program which is
10 able to perform the lead screening.

11 c. If a physician, registered professional nurse, or health care
12 facility, agency, or program receives laboratory test results indicating
13 that a child has an elevated blood lead level, the physician, registered
14 professional nurse, or health care facility, agency, or program shall
15 notify the parent or guardian of the child, in writing, about the test
16 results, and shall additionally provide the parent or guardian with an
17 explanation, in plain language, of the significance of lead poisoning.
18 The physician, registered professional nurse, or health care facility,
19 agency, or program shall also take appropriate measures to ensure
20 that any of the child's siblings or other members of the household
21 who are **【under the age of six】** 16 years of age or younger either are,
22 or have been, screened for lead exposure.

23 d. A physician, registered professional nurse, or health care
24 facility, agency, or program shall not be required to conduct lead
25 screening under this act if the parent or guardian of the child objects
26 to the testing in writing.

27 e. (1) The department shall specify, by regulation, the
28 parameters for lead screening required under this act, including the
29 age of the child when initial screening shall be conducted, the time
30 intervals between screening, when follow-up testing is required, and
31 the methods that shall be used to conduct the lead screening.

32 (2) (a) The department shall additionally specify, by regulation,
33 in accordance with the most recent recommendations of the federal
34 Centers for Disease Control and Prevention, the elevated blood lead
35 levels that require responsive action under this act, and the types of
36 responsive action, including environmental follow-up, notice to the
37 family, additional screening of family members, the provision of case
38 management services, and the provision of medical treatment such as
39 chelation therapy, that shall be undertaken when a screening test
40 reveals an elevated blood lead level. The levels of responsive action
41 required by the department pursuant to this paragraph may vary,
42 consistent with the latest recommendations of the federal Centers for
43 Disease Control and Prevention, based on the severity of the elevated
44 blood lead level.

45 (b) Within 30 days after the enactment of P.L.2017, c.7, and on a
46 biennial basis thereafter, the department shall review and
47 appropriately revise its rules and regulations pertaining to elevated
48 blood lead levels, in order to ensure that they appropriately reflect,

1 and are consistent with, the latest guidance from the federal Centers
2 for Disease Control and Prevention.

3 f. The department shall develop a mechanism, such as
4 distribution of lead screening record cards or other appropriate
5 means, by which children who have undergone lead screening can be
6 identified by physicians, registered professional nurses, and health
7 care facilities, agencies, and programs that perform lead screening,
8 so as to avoid duplicate lead screening of children.

9 g. The department shall continuously engage in a public
10 information campaign to inform the parents of young children, as
11 well as physicians, registered professional nurses, and other health
12 care providers, of the lead screening requirements of this act. At a
13 minimum, the public information campaign shall: (1) highlight the
14 importance of lead screening, and encourage parents, especially those
15 who have not yet complied with the lead screening provisions of this
16 act, to have their children screened for lead poisoning at regular
17 intervals, in accordance with the age-based timeframes established
18 by department regulation; and (2) provide for the widespread
19 dissemination of information to parents and health care providers on
20 the dangers of lead poisoning, the factors that contribute to lead
21 poisoning, the recommended ages at which children should be tested
22 for lead poisoning, and the elevated blood lead levels that require
23 responsive action under this act. If the department changes the
24 elevated blood lead levels that require responsive action under this
25 act, as may be necessary to conform its regulations to federal
26 guidance, the information disseminated through the public
27 information campaign shall be appropriately revised to reflect the
28 new action levels, and shall be reissued to parents and health care
29 providers, within 30 days after the change is implemented.

30 h. The department, to the greatest extent possible, shall
31 coordinate payment for lead screening required pursuant to this act
32 with the State Medicaid program established pursuant to P.L.1968,
33 c.413 (C.30:4D-1 et seq.) and other federal children's health
34 programs, so as to ensure that the State receives the maximum
35 amount of federal financial participation available for the lead
36 screening services provided pursuant to this act.
37 (cf: P.L.2017, c.7, s.5)

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39 3. This act shall take effect on the 90th day after the date of
40 enactment.