

# Issues for Michigan's Children

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December 1, 2003

## State Surgeon General and Michigan Legislature Addressing Lead Poisoning in Children

**How Many Children Are Affected By Lead Poisoning In Michigan?** Lead poisoning affects an estimated 20,000 children under the age of six in Michigan. In 2002, approximately 93,000 of the state's infants and children six years of age and younger were tested for lead poisoning, and 5 percent were found to have dangerously high levels of lead in their blood. Unfortunately, many Michigan children who are at high risk of lead poisoning are not tested at all, even though federal and state policies require testing.

**How Does Lead Affect Children?** Although many children suffering lead poisoning show few symptoms initially, if undetected and untreated, lead poisoning can result in brain damage, mental retardation, learning disabilities, behavior problems, anemia, liver and kidney damage, hearing loss, developmental delay, hyperactivity and, in extreme cases, coma and death.

**How Does Lead Poisoning Affect The State's Economy and Communities?** It is estimated that the total annual economic cost of childhood lead poisoning in Michigan could be \$1 billion (Michigan Lead Safe Partnership). These costs arise from:

- costs of direct health care and rehabilitation for affected children;
- higher drop-out rates, lower wages and diminished earnings for children affected;
- increased need for special education services; and
- increased anti-social and delinquent behavior by affected children and adolescents.

**Are Some Children More At-Risk?** Yes, the following children are most at-risk:

- *Young children.* Children under the age of 3 are most at-risk of lead poisoning because their brains are developing so rapidly, and because they are more likely to expose themselves by putting contaminated items and hands in their mouths.
- *Poor and low-income children.* Poor children are more likely to be exposed to lead because they often live in older, poorly maintained housing. Poor children are also more likely to have negative effects from lead because of compromised health, poor nutrition, and problems accessing preventive health care. It is estimated that approximately half of all children under six are either Medicaid-eligible and/or live in high-risk zip codes where there are a significant number of older homes with lead-based paint (Michigan Department of Community Health). Children insured by Medicaid are three times as likely to be lead-poisoned as other children--roughly 9 percent of Medicaid children tested have had unacceptably high levels of lead in their blood, compared to 3 percent for non-Medicaid children (Kids Count in Michigan).



- *Children residing in major urban areas.* There are higher rates of lead poisoning in Michigan's major urban areas because there is a greater stock of homes constructed prior to 1950 when over 90 percent of homes used lead-based paint. In 2002, more than two of every three confirmed cases of lead poisoning were from the City of Detroit. However, other urban areas have very high rates of lead poisoning. In some older urban neighborhoods, lead poisoning rates are as high as 20 percent (Michigan Lead Safe Partnership).

**Are Some Children More Likely To Be Tested For Lead Poisoning Than Others?** Yes, lead testing rates vary greatly by county. In only three counties--Schoolcraft, Luce and Kent--are more than one-quarter of children ages 0 to 3 tested. In many counties, fewer than 1 percent of young children are tested.

**Are There Any Laws Requiring Health Professionals To Test For Lead Poisoning?** Federal and state policies require that all children enrolled in Medicaid receive a blood lead screening at one and two years of age, or once between the ages of three and six if they had not been previously tested. Despite this requirement, only 15 percent of one- and two-year-old children enrolled in Medicaid in Michigan in 2002 were tested for lead.

**Why Aren't More Children Being Tested?** There are many reasons that children--including children greatly at risk for lead poisoning--are not being tested, including:

- Parents aren't always informed or aware of the threat of lead-based paint, or the need to test for and treat lead poisoning.
- Parents may have trouble accessing testing and subsequent health care because they are uninsured, cannot find a primary care provider, or have transportation or other personal barriers to seeking care.
- Health professionals may be unaware of the standard of care for lead testing, or not complying.
- There is insufficient funding for comprehensive lead testing and abatement.
- Renter and homeowners may not have information about the existence of lead hazards in the homes they rent or purchase.
- Renters and homeowners may be limited in the housing they can secure because of geography or income.
- Community-based health and social service providers who may be able to recognize the need for testing, including Head Start teachers, local health departments and Women, Infant and Nutrition (WIC) nutrition providers, may not have resources or incentives to ensure that children are tested when their primary providers have not complied with requirements.
- There may be few housing or emergency relocation options for families who must move while their homes are being cleared of lead hazards.

**What is Michigan Doing to Protect Children From Lead Poisoning?** Fortunately, the problem of lead poisoning has become a top priority for Michigan's Surgeon General, Dr. Kimberlydawn Wisdom, and it now beginning to be a focus of legislative activity.

**Leadership by the Granholm Administration:** In August of 2003, Governor Granholm announced a major lead poisoning prevention and treatment initiative to be headed by the state's Surgeon General, Dr. Kimberlydawn Wisdom. Based on recommendations in the Governor's report entitled *Childhood Lead Poisoning Prevention: A Call to Action* ([www.michigan.gov/documents/ChildLeadPoisoning2\\_71150\\_7.pdf](http://www.michigan.gov/documents/ChildLeadPoisoning2_71150_7.pdf)), Dr. Wisdom convened a task force to evaluate current policies and programs, and to forward recommendations



for improving prevention. Michigan's Children has been a very active member of the lead prevention task force, and is committed to working closely with the Dr. Wisdom and the Michigan Legislature in forwarding a lead prevention agenda.

Among the recommendations from *A Call to Action* are:

- Lead testing information to be sent to each new parents.
- Education of health care providers who treat children in high risk areas or in the Medicaid program to perform lead testing based on the recommendations of the federal Center for Disease Control and Prevention and the American Academy of Pediatrics.
- A new focus on funding for lead abatement.
- Improved lead risk assessment, particularly in the state's older, urban areas.
- The targeting of state housing loan programs to homeowners and landlords needing to clean up lead hazards.
- The creation of a lead-safe housing registry to inform families of houses that have been inspected and found to be lead-safe.
- The establishment of state civil or criminal penalties and fines for rental agencies or property owners who knowingly fail to clean up lead hazards and then rent or sell the housing.
- Strengthened efforts to require that Medicaid providers increase the percentage of Medicaid children tested, with a goal of testing 80 percent of Medicaid children within three years.

**Legislative Leadership:** A number of Michigan legislators have make lead poisoning prevention a priority, and have begun to work in a bi-partisan fashion to ensure that the state's children are protected. A package of bills has been introduced in the Michigan House and the Senate, are are beginning to be reviewed in committees. Among the bills are:

**Senate Bill 753 (Scott)/ House Bill 5118 (Kolb):** This bill establishes a broad-based childhood lead poisoning prevention and control commission. The charge to the commission is to: (1) study the environmental threat of lead poisoning to children's health; (2) review the state's lead poisoning prevention efforts; (3) evaluate state programs; and (4) recommend improvements. The commission, which would include parents and advocates, would conduct at least two public hearings.

**Senate Bill 754 (Schauer)/ House Bill 5119 (Williams):** This bill requires, that beginning January 1, 2006, as a condition of receiving Medicaid payments, all health professionals, facilities, or HMOs must be in "substantial compliance" with federal standards for lead screening for children enrolled in Medicaid. To be in substantial compliance, Medicaid providers must be screening at least 80 percent of the children enrolled for lead exposure. The bill also allows the Michigan Department of Community Health to withhold payment for the costs of the screening test from an HMO, and use those funds to contract with other community-based agencies or local health departments to provide lead screening tests for children enrolled in Medicaid.

**Senate Bill 755 (Hammerstrom)/ House Bill 5117 (Ehardt):** This bill requires that by October 1, 2005, clinical laboratories that analyze blood samples for lead must report the results of the tests to the Michigan Department of Community Health electronically within 30 days. The goal is to ensure more uniform and complete data on lead testing and elevated lead levels in children.



**Senate Bill 756 (Hardiman)/ House Bill 5116 (Richardville):** This bill establishes a "lead safe housing registry" that can provide the public with a listing of residential and multi-family dwellings, and other "child-occupied" facilities (e.g. child care centers and homes) that have been inspected and are certified as lead-free. Relatively few states have established lead registries. One successful program was launched in the state of Maryland in 1996. Maryland requires rental properties build before 1950 to be registered with the state's lead program, and to indicate if the lead has been tested and cleared. Properties built between 1950 and 1978 can register voluntarily. Since the registry was established, Maryland has experienced an 80 percent reduction in elevated blood lead levels.

**Senate Bill 757 (Clarke)/ House Bill 5115 (Hardman):** This bill requires that beginning in January of 2004, any rental agent, landlord or owner who rents or leases a rental unit with "personal knowledge" that there are lead hazards would be guilty of a misdemeanor punishable by imprisonment of up to 90 days, and a fine of not more than \$5,000 or both. In addition, the landlord or rental agent would be required to return all rental payments made during the period of exposure to the lead-based paint hazards. (Please note: HB 5515 was referred to the House Judiciary Committee)

**How Can I Get Involved?** Michigan legislators need to hear that communities support efforts to prevent lead poisoning and its often irreversible and tragic effects on young children. Contact your local legislators, as well as the members of the Senate and House Committees that will be working on the bills listed above. E-mail addresses are listed below, for mailing addresses or phone numbers, see [www.michiganschildren.org/page.cfm/88](http://www.michiganschildren.org/page.cfm/88).

***Senate Committee on Families and Human Services:***

- *Senator Bill Hardiman, Chair (R-Kentwood)* SenBHardiman@senate.michigan.gov.
- *Sen. Beverly Hammerstrom, Vice Chair (R-Temperance)* SenBHammerstrom@senate.michigan.gov
- *Sen. Alan Sanborn (R-Richmond Township)* SenASanborn@senate.michigan.gov
- *Sen. Gilda Jacobs, Minority Vice Chair (D-Huntington Woods)* SenGJacobs@senate.michigan.gov
- *Sen. Irma Clark-Coleman (D-Detroit)* SenIClark-Coleman@senate.michigan.gov

***House Committee on Health Policy:***

- *Rep. Stephen Ehardt, Chair (R-Lexington)* sehardt@house.mi.gov
- *Rep. Barbara Vander Veen, Vice Chair (R-Allendale)* repbarbvanderveen@house.mi.gov
- *Rep. Ruth Johnson (R-Holly)* rujohnson@house.mi.gov
- *Rep. Sal Rocca (R-Sterling Heights)* srocca@house.mi.gov
- *Rep. Doug Hart (R-Rockford)* dist073@house.mi.gov
- *Rep. Gary Woronchak (R-Dearborn)* gworonchak@house.mi.gov
- *Rep. William Van Regenmorter (R-Georgetown Township)* wmvanreg@house.mi.gov
- *Rep. David Robertson (R-Grand Blanc)* davidrobertson@house.mi.gov
- *Rep. Edward Gaffney (R-Grosse Pointe Farms)* edwardgaffney@house.mi.gov
- *Rep. Joe Hune (R-Fowlerville)* joehune@house.mi.gov
- *Rep. Chris Ward (R-Brighton)* chrisward@house.mi.gov
- *Rep. Stephen Adamini, Minority Vice Chair (D-Marquette)* sadamini@house.mi.gov
- *Rep. Lisa Wojno (D-Warren)* lisawojno@house.mi.gov
- *Rep. Artina Hardman (D-Detroit)* ahardman@house.mi.gov
- *Rep. William O'Neil (D-Allen Park)* woneil@house.mi.gov
- *Rep. Matthew Gillard (D-Alpena)* matthewgillard@house.mi.gov
- *Rep. Brenda Clack (D-Flint)* brendaclack@house.mi.gov

