

DEPARTMENT OF HEALTH SERVICES

P.O. BOX 942732
SACRAMENTO, CA 94234-7320
(916) 327-1400



September 21, 2001

CHDP Provider Information Notice No. 01- 06 (CORRECTED)

CLPP Provider Information Notice No. 01-A (CORRECTED)

TO: CHILD HEALTH AND DISABILITY PREVENTION (CHDP) PROGRAM
PROVIDERS AND MEDI-CAL MANAGED CARE PLANS

SUBJECT: BLOOD LEAD SCREENING AND ANTICIPATORY GUIDANCE ON LEAD
POISONING, NEW CHDP CODE NUMBERS FOR BILLING AND
REPORTING BLOOD LEAD TESTING, AND INCREASED
REIMBURSEMENT WHEN BLOOD DRAWING FOR LEAD TESTING IS
PERFORMED BY THE HEALTH ASSESSMENT PROVIDER

The purpose of this Information Notice is to remind you of your responsibility to screen for and provide anticipatory guidance on lead poisoning and to inform you of new CHDP codes and procedures for billing and reporting blood lead testing. You are also advised that reimbursement rates have been increased when blood lead testing includes drawing of a blood sample by the health assessment provider.

- I. **CHDP Health Assessment Provider Responsibilities for Lead Screening and Guidance:** Children who participate in government assisted health care programs are at increased risk for lead poisoning.¹ The responsibilities of health care providers who care for children in the CHDP program with respect to detection of lead poisoning and anticipatory guidance on lead hazards and harmful effects are specified in CHDP and Childhood Lead Poisoning Prevention Branch (CLPPB) policy and California Regulations.^{2,3}

Blood lead testing must be performed at 12 and 24 months of age in all children receiving health care services through CHDP. Blood lead testing must also be performed between 12 and 24 months, if testing was not done at 12 months and between 24 and 72 months in children who were not previously tested or who missed the 24 month test.^{2,3} Lead levels may additionally be measured at times other than those specified, if thought indicated by the CHPD health assessment provider or in response to parental concerns.^{2,3}

Anticipatory guidance to provide an environment safe from lead shall be included as part of each health assessment visit from six months to 72 months of age.^{2,3} Caregivers are to be informed that children can be harmed by

exposure to lead, especially in deteriorating or disturbed lead based paint and the dust from it, and are particularly at risk of lead poisoning from the time the child begins to crawl until 72 months of age.³

- II. New CHDP Codes to Report and Claim Reimbursement for Blood Lead Testing:** To encourage CHDP health assessment providers to comply with requirements for blood lead testing and counseling on lead poisoning and to facilitate program monitoring, **new codes have been developed. One code is for use whenever a blood sample is drawn for lead testing. Another code is for when a child is referred for blood drawing and lead testing.** These codes allow CHDP health assessment providers to report that they have complied with requirements by counseling on the risks of lead poisoning and have either drawn a blood sample that was sent for lead testing or have referred a child for blood drawing and lead testing. Health assessment providers who draw a blood sample for lead testing will receive an increase in reimbursement.

Effective September 1, 2001, please use these new CHDP codes:

Code 23 – when you counsel on lead poisoning and draw a blood sample in your office that is sent for blood lead testing.

Code 24 - when you counsel on lead poisoning and refer the child to a laboratory for blood drawing and blood lead testing.

<u>CHDP Code</u>	<u>Description</u>	<u>Reimbursement Rate</u>
23	Lead Test: Blood drawing for lead testing and lead counseling Age zero to 20 years 11 months	\$ 18.73
24	Lead Refer: Counseling and referral for blood drawing for lead testing Age zero to 20 years, 11 months	\$ 0.00

These codes apply to blood drawing by either venipuncture or finger stick.

Please note:

Effective September 1, 2001, Codes 23 and 24 are to be used by all CHDP provider types to indicate blood lead testing, except provider type 26 (laboratories certified for blood lead testing) and provider type 27 (clinical

laboratories).

Effective September 1, 2001, CHDP Code 15 is only reimbursable when used by provider types 26 and 27. There are no changes in billing procedures or in reimbursement rates for Code 15 for these categories of providers.

III. When Codes 23 and 24 Should be Used: Either Code 23 or 24 should be used whenever blood lead testing is indicated to report that counseling has been given on lead poisoning and that either a blood sample has been drawn for lead testing (Code 23) or a referral has been made for blood drawing and lead testing (Code 24).

- Since blood lead testing is required at 12 and 24 months for children receiving health assessments through CHDP, either Code 23 or 24 should be included on the PM 160 Confidential Screening and Billing Report for the 12 month and 24 month health assessment visits.
- Other indications for blood lead testing through CHDP, which would be reported using either Codes 23 or 24, include:
 - children between the ages of 12 and 24 months who were not tested at 12 months;
 - children between 24 and 72 months who were not previously tested or who missed the 24 month test;
 - children of any age, at any time interval after the prior blood lead screen, if the physician or parent is concerned about possible lead exposure;
 - children with blood lead levels at or above 10 µg/dl and below 20 µg/dl who require periodic blood lead re-measurement, as per CHDP and CLPPB guidelines;^{4,5} and
 - confirmatory, venous blood lead testing in children with elevated screening blood lead levels.

Every child with a blood lead level at or above 10 µg/dl needs additional followup. For information on referral and care management of children with elevated blood lead levels, please see CHDP and CLPPB guidelines or contact your local CHDP or Childhood Lead Poisoning Prevention Program (CLPPP) office.

Please note:

The higher the blood lead level, the more urgent the need for follow-up testing and referral for clinical care and case management. The following are the referrals expected of the CHDP health assessment provider:

- Children with blood lead levels of 10 through 14 $\mu\text{g}/\text{dl}$ require repeat testing within three months and additional counseling on lead hazards and preventive measures.
- Children with blood lead levels that remain 15 through 19 $\mu\text{g}/\text{dl}$, on repeat testing, one to two months apart, should be referred by the CHDP health assessment provider to the local CLPPP for coordination of care, environmental investigation and lead hazard control.
- Children with confirmed blood lead levels at or above 20 $\mu\text{g}/\text{dl}$ should be referred to California Children's Services (CCS) for authorization for medical care and medical case management and to the local CLPPP.
- Children with blood lead levels of 20 $\mu\text{g}/\text{dl}$ through 44 $\mu\text{g}/\text{dl}$ should have the level confirmed within one week to one month, depending on the level.
- Blood lead levels of 45 through 59 $\mu\text{g}/\text{dl}$ require confirmation in less than 48 hours and rapid referral to CCS, CLPPP, and for medical care.
- Values between 60 and 69 $\mu\text{g}/\text{dl}$ should be confirmed within 24 hours and rapidly referred, as above.
- Lead levels at or above 70 $\mu\text{g}/\text{dl}$ are a medical emergency.

IV. Reporting and Billing Instructions:

Please use the following instructions for reporting and billing Codes 23 and 24:

- In the "Other Tests" section of the PM 160 form, enter the appropriate code (Code 23 or 24) on a blank line, in the "Code" column.
- In the adjoining column, on the same line, indicate that this is a Lead Test (Code 23) or a Lead Refer (Code 24).

CHDP Provider Information Notice No.: 01-06 (CORRECTED)

CLPP Provider Information Notice No.: 01-A (CORRECTED)

Page 5

September 21, 2001

- Enter the correct fee in the Fees Column (Note: There is no reimbursement for Code 24 and fees do not apply on the "Information Only" PM 160 form).
- No entry is needed in the "Comments" section.

V. Comment/Questions: Your help in providing CHDP screening and counseling for lead poisoning is appreciated. If you have any questions, please contact your local CHDP or CLPPP office. A current list of CLPP programs is enclosed.

Original Signed by Maridee Gregory, M.D.

Maridee A. Gregory, M.D., Chief
Children's Medical Services Branch

Original Signed by Valerie Charlton, M.D.

Valerie Charlton, M.D., M.P.H., Acting Chief
Childhood Lead Poisoning Prevention Branch

Enclosure

CHDP Provider Information Notice No.: 01-06 (CORRECTED)
CLPP Provider Information Notice No.: 01-A (CORRECTED)
Page 6
September 21, 2001

References:

- 1) U.S. General Accounting Office: Lead Poisoning: Federal Health Care Programs Are Not Effectively Reaching At-Risk Children. HEHS-99-18
- 2) CHDP Provider Information Notice No. 00-03 and CLPP Provider Information Notice No. 00-A, issued June 15, 2000
- 3) California Code of Regulations, Title 17, Division 1, Chapter 9. Article 2, Standard of Care on Screening for Childhood Lead Poisoning.
- 4) Child Health and Disability Prevention Program. Management Guidelines for Children with Elevated Blood Lead Levels. In: Health Assessment Guidelines, 1997, p. 704-3
- 5) Childhood Lead Poisoning Prevention Program. Public Health Nursing Case Management Interim Guidance Manual, 2000, Appendix 5.