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## SP605-D-Focus on Lead Screening for TennCare Recipients

The University of Tennessee Agricultural Extension Service

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# Focus on Lead Screening for TennCare Recipients\*



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SP 605-D

## ► **Why focus on TennCare recipients?**

Public health experts agree that young children who receive TennCare are more likely to be part of a family with poverty-level income. These children may be more at risk for lead exposure, so screening is important. It is estimated that more than 80 percent of all children with blood lead levels (BLL) that require individual follow-up ( $\geq 20$   $\mu\text{g}/\text{dL}$ ) may be found in Medicaid recipients. In Tennessee, Medicaid funds TennCare services.

## ► **What can be done to prevent lead poisoning among TennCare recipients?**

In 1989, a federal law was passed requiring screening blood lead levels in children who receive Medicaid. However, in a 1998 report by the General Accounting Office, it was estimated that 81 percent of these children are never screened. The Centers for Medicare and Medicaid (CMS)



\*Adapted from the Alliance to End Childhood Lead Poisoning and the Centers for Medicaid and Medicare.

have stated that all children receiving Medicaid/TennCare must be screened for lead poisoning at the ages of 12 and 24 months. The goals are to reduce the large percentage who are never screened and to increase the number of children who are identified and/or treated. Furthermore, state Medicaid agencies must report each year on the number of children who are screened

## ► **Why are screening rates so low?**

Several factors impact the low lead-screening rates in Medicaid/TennCare recipients:

1. Tracking systems are not in place or are not being used appropriately; therefore, specific clusters or populations at risk are not being identified.
2. There is a lack of awareness among healthcare providers regarding the significant risk of lead poisoning among young children. In addition, healthcare providers may be uncertain as to their role in providing case management for a child whose blood lead level is elevated.

3. Lead screening may not be viewed as part of preventive service. So, managed care plans do not include blood lead levels as part of performance measurement.
4. Lead screening may be viewed by managed care plans as underfunded by reimbursement and an unnecessary addition to preventive screening.

## ► **What is Tennessee doing to increase screening?**

The Tennessee Department of Health has launched a statewide program to increase awareness among several different populations. Included are parents and other care givers, childcare providers, healthcare providers, local health departments and community groups. Through a partnership of the Tennessee Department of Health and The University of Tennessee Extension Service, information and materials are being provided to the above-targeted groups. A full-time case manager is now in place to provide follow-up of children tested with elevated levels. Data are collected and analyzed to better track the incidence of lead poisoning and identify potential problem areas.



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