



Insider News

Lead and Healthy Homes
Division Newsletter
August 2019



Indiana State
Department of Health

New Online Tool Calculates Cost & Economic Benefits of Preventing Childhood Lead Exposure

In May 2019, Altarum, a not-for-profit research and consulting organization based in Michigan, with funding from the Robert Wood Johnson Foundation, launched a new interactive online tool designed to provide comprehensive state-level data on the cost of childhood lead exposure in the United States and the economic benefits of interventions.

ValueofLeadPrevention.org enables policymakers, community leaders and residents to calculate the cost of childhood lead exposure in their state and the economic benefits of adopting interventions to reduce the risk of lead exposure, from replacing drinking water service lines to eradicating lead paint hazards in older homes.

ValueofLeadPrevention.org builds on research conducted in 2017 that estimates the annual cost of childhood

lead exposure in the United States at \$84 billion based on reduced lifetime productivity, increased health care and social assistance spending, and premature mortality. The new online tool provides state-specific information about:

- The number of children with unsafe blood lead levels
- The annual cost of lead exposure, and the share of the cost across the federal, state and private sectors
- The economic benefit of the following interventions:
 - Lead service line replacement
 - Residential lead hazard control
 - Enforcement of EPA renovation, repair and painting rules

Users can customize the inputs on the cost and scope of interventions to get a more precise estimate of the economic benefit in the community.

Lead & Healthy Homes Website Highlight

Free Lead and Healthy Homes brochures and other resources are available

Did you know that you can order a variety of free brochures, posters, coloring books, infographics and much more

from the LHHD webpage?

A limited supply of these resources can be requested through an ordering process found by clicking the "[Publications](#)" link located on the "[Tools For Local Health Department Staff](#)" page. Additional new pregnancy related resources, the "Prenatal Risk Evaluation Questions for Lead Exposure" and "Lead and Pregnancy: Keep Baby Safe" Infographic are also available.



Toxicological Profile for Lead Available for Public Comment

The Agency for Toxic Substances & Disease Registry (ATSDR) is a federal public health agency of the U.S. Department of Health and Human Services. ATSDR protects communities from harmful health effects related to exposure to natural and man-made hazardous substances. In support of their work, the agency maintains peer-reviewed toxicological profiles of a variety of substances, including lead. The draft profile for lead is available for review and public comment. The profile provides a great deal of useful, basic information on lead, including the adverse health effects and relevance to public health of lead, routes of exposure, susceptible populations and much more. Take this opportunity to provide any feedback and comment to ATSDR on the content of the Profile. The Toxicological Profile for Lead can be found [here](#).

Updated Manual: Radon Testing in Schools

In response to Indiana Senate Bill 632 that was signed into law by Gov. Eric Holcomb in spring 2019, the ISDH Environmental Public Health Division, will release an [updated manual](#) of best practices for managing indoor air quality in schools at the end of July 2019. The manual will include a section with recommendations for radon testing. Collaborating partners in the writing of the manual include the ISDH Asthma Program and the Indiana Department of Environmental Management (IDEM).

CONTACT US

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State of the Division



As I sit in my office, looking out the window on one of the hottest days of the year thus far, I am reminded of how much time our kids spend inside. Often, weather that is too hot or too cold means time spent inside, and that means time spent around possible lead hazards.

Two recent actions in our state are going to allow us to better help identify and serve those kids affected by, and living around, lead hazards. The first of these is the decision made at the beginning of July by the Office of Medicaid to allow local health departments to bill for nursing case management services that are provided to children with elevated blood lead levels (EBLLs) at or above five (5) $\mu\text{g}/\text{dL}$. This decision is the result of years of advocacy work, both by individuals at the state level, and by local champions, making the need for this service known.

The second recent action is the launch of a pilot with the Indiana WIC program at the beginning of July. The pilot will provide support to WIC clinics which will enable them to test blood lead levels of children during their one-year certification visits. Lasting for one year, this pilot is seeking to test between 10,000-15,000 Indiana kids who are most at risk for EBLLs. From the effort of the pilot ISDH hopes to certainly identify children affected by lead, but also we seek to make the case that testing our WIC population is one of the most effective routes for identifying high-risk children affected by EBLLs.

Neither of these efforts would be possible without the tremendous work that is done daily by you, our partners in the community. On behalf of myself and the entire Lead and Healthy Homes team at ISDH, stay cool and stay safe.

Thanks,
Paul Krievins

Lead and Health Homes Division Director

Lasting Effects of Lead Exposure During Pregnancy and Breastfeeding

“Lead exposure during pregnancy and breastfeeding can result in lasting adverse health effects independent of lead exposure during other life stages.” The [Guideline for the Identification and Management of Lead Exposure in Pregnant and Lactating Women](#) provides evidence-based strategies for interventions for clinicians and the public health community regarding the screening and management of pregnant and lactating women who are exposed to high levels of lead. Bone lead stores are mobilized in pregnancy and lactation for women with prior lead exposure, which is a concern since lead released into maternal blood and breast milk can adversely affect the fetus or newborn.

LHDs Able to Bill Medicaid for Nursing Case Management Services

In an email on July 17, Dr. Box shared with local health departments that in early July, Indiana's FSSA Office of Medicaid Policy and Planning released a bulletin announcing that local health departments will now be allowed to bill Medicaid for nursing case management services associated with children who have blood lead levels above five (5) $\mu\text{g/L}$. Some of the key points from the guidance include:

1. This change covers nursing case management services delivered to Medicaid enrollees starting 7/1/19.
2. While services are covered as of 7/1, claims submitted for these services will not be paid before 8/5/19.
3. Case management will need to be tracked and claimed in 15-minute increments.
4. Medicaid will authorize up to 26, 15-minute increments (or 6.5 hours total), for a covered individual in a 12-month period without prior authorization.
5. Reimbursement will be at \$8.84 per 15-minute increment (a total of \$229.84 in a 12-month period).
6. Reimbursement for costs above and beyond the first 6.5 hours will require pre-authorization.
7. This policy covers individuals from birth through age 20. It does not cover services provided to pregnant women found to have elevated blood lead levels during pregnancy.

If you currently bill Medicaid for other lead services, including Environmental Risk Assessments, please begin billing for your nursing services as well. If you are not currently billing Medicaid for services, we encourage you to start. Contact Paul Krievins at 317-233-7197 or pkrievins@isdh.in.gov for more information.

Collecting a Lead Specimen

Lead is everywhere in the environment, and it is easy to contaminate blood samples during the collection process, which can cause inaccurate lab results. Lead can be picked up by accident from many sources, including work surfaces, from printed materials, from the hands of the collector or the hands and the clothes of the child being tested. The key to effective lead testing is making every effort to follow those procedures to reduce the risk of contamination and achieve accurate blood lead results.

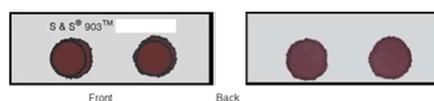
To reduce the odds of contaminating your sample there are many things that can be done, including;

- Assuring that the workspace is clean and as lead free as possible
- Adequately washing your hands, and the child's hands with soap and water
 - Make sure to not allow the child to touch anything afterward to prevent contamination
- Following ISDH Laboratory procedure instructions when preparing the finger and obtaining the specimen

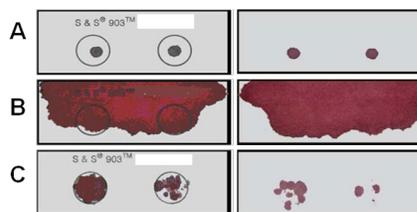
Step-by-Step for Lead Collection:

1. Wash patients' hand with soap & water, dry with non-recycled paper towels
2. Wipe away first drop of blood
3. Use gravity by turning finger downward toward floor
4. Do NOT allow blood drop to touch paper, and do NOT shake drop from finger; blood drop must be allowed to **FREE FALL** onto filter paper card
5. Minimum specimen is **two (2)** free falling drops
6. Properly label card with patients' name, DOB and date of collection
7. Allow **4-hours** to dry before closing filter paper card
8. Order in LIMSNet and ship to laboratory

Acceptable:



Unacceptable:



The ISDH Blood Lead Specimen Collection Guide is available [here](#).





Risk Assessment Tip

Healthy Homes & Remediation

Eliminating lead hazards in a home is our primary goal. However, it is crucial to remember the Principles of a Healthy Home as many of them interconnect with the remediation efforts that lead Risk Assessors recommend. Failure to correct underlying moisture issues (e.g. bad windows, clogged/poorly hung gutters and downspouts, lack of ventilation in a bathroom) will cause general repairs that have been made to fail more quickly, costing homeowners more money in the long run. A clean, healthy home helps ensure that people are not exposed to contaminants and chemicals, and that pests don't have food, water, and a place to live. An emphasis on cleaning the home to a lead safe standard will also help correct sanitary maintenance issues and keep a home clean. This helps ensure that

individuals are not exposed to these contaminants. Lower income families, and the general population alike, are always looking for cost effective ways to quickly reduce lead exposure risk and have a healthy home. Removing shoes at the door reduces dust and dirt in the living space and reduces lead risk. The thorough cleaning of a home is a very cost effective way to quickly reduce lead exposure, and address the Principle of a Healthy Home. Contact Phil Waters, pwaters@isdh.in.gov, 317-234-8604 with questions.

Case Management Tip

Unexpected Sources

When present, lead hazards can be found in many locations in a home, but the most common sources in Indiana are old paint, soil, and paint dust and chips. However, some less commonly known alternate sources include a variety of folk remedies and medicines. These are often brought to Indiana by family members, and are frequently found to have come from the Middle East, Southeast Asia, India, the Dominican Republic or Mexico. Greta and Azarcon (also known as alarcon, coral, luiga, maria luisa, or rueda) are Hispanic traditional medicines taken for an upset stomach (empacho), constipation, diarrhea and vomiting. They are also used on teething babies.

Greta and Azarcon are both fine orange powders that have been found to have a lead content as high as 90%. Ghasard, an Indian folk medicine, has also been found to contain lead. It is a brown powder used as a tonic. There are many remedies used and they go by many different names.

Recently in one Indiana county, two children were found to have elevated blood lead levels following the use of Gutti Powder, a powder brought to the U.S. by the family to treat stomach problems. In this case, the family lived in a newer home and it was through extensive conversations with the family, and a thorough case investigation and risk assessment by the Case Manager and the Risk Assessor that the source of the lead was found. Specimens of the powder for this case were submitted to the ISDH lab using an ISDH Food Protection Sample Collection Form. For information and to obtain a Food Protection Collection Form, contact ISDH Food Protection Division Contacts, Kris Gasperic, Consumer Specialist at 317-233-8475, kgasperic@isdh.in.gov, or Judy Blythe, secretary, at 317-234-8569, jblythe@isdh.in.gov.

Don't forget to be alert for the unexpected possibilities during your home visits and throughout your case management. Contact Teresa Kirby, tkirby@isdh.in.gov, 317-233-8606, or any LHHD staff for assistance.



The graph shows how many organizations have signed up to report blood lead level results to ISDH electronically through direct entry to **Lead Data Flow**, since the beginning of 2018. Starting in **quarter 4 of 2018**, there has been an increase in organizations that requested credentials, when compared to the first three quarters of 2018. The rise in the number of those who have signed up has continued through 2019, with the **total of new organizations signing up in quarter 2 doubling the total number from the previous quarter.**