

Joint Subcommittee Studying Lead Poisoning Prevention

SJR 103

Pursuant to SJR 103 2006 the Joint Subcommittee Studying Lead Poisoning Prevention held its first meeting of the interim on October 18, 2006.

Senate Joint Resolution 103 directed the Joint Subcommittee to (i) monitor the development of the reference database of statewide health-related data to determine its usefulness in containing health care costs and improving health care outcomes, including among children who may be exposed to lead risks or may have elevated blood lead levels; (ii) seek to obtain the two essential lead program elements needed by the Department of Health to be competitive in the 2006 federal grant process; and (iii) continue to assist the agencies of the Commonwealth to obtain funding for activities to protect Virginia's children from lead risks. This first meeting was designed to begin to cover these three directives.

Virginia Lead Safe Homes Program

The subcommittee first heard an update on the Virginia Lead Safe Homes Program from Floris Weston, Program Manager with the Department of Housing and Community Development. Ms. Weston explained that the Department's goal is to leave local communities with an improved ability to approach local issues, including lead poisoning issues. She explained that the DHCD is currently working with a \$3 million HUD grant targeting multiple offenders, that is, housing identified by the Health Department as being associated with more than one incident of lead poisoning of a child under the age of six. By targeting multiple offenders, the Department hopes to have a greater impact than if they simply met their goal of 100 units randomly.

Ms. Weston also mentioned the need to encourage localities to seek federal funding. In the last grant round, no Virginia localities received HUD funding. It is unclear whether this is because they failed to apply, or if their applications were simply unsuccessful. The Chairman was surprised to hear of this failure to receive funding, and he reminded the subcommittee that one of their original purposes was to help agencies ensure grant funding. It was agreed that the issue of funding should be revisited at the subcommittee's second meeting.

Certification of Lead Contractors and Workers

Next the subcommittee heard from David Dick, Executive Director of the Department of Professional and Occupational Regulation. Mr. Dick explained that DPOR, along with the Board of Asbestos, Lead, and Home Inspectors are continuing their role of maintaining a regulatory infrastructure enabling those needing lead-abatement to locate qualified contractors and professionals. In order for a project to be considered lead-abatement, one of the following conditions must exist: (i) there is an elevated blood-lead level child resident in the property when the work is being done, (ii)

more than \$25,000 in HUD grant money is being expended, or (iii) the stated purpose of the project is to permanently eliminate lead-based paint hazards.

Mr. Dick also updated the subcommittee on the status of a proposed EPA rule that was published in January of 2006. The proposed rule contains new requirements to reduce exposure to lead hazards by renovation, repair, and paint activities that disturb lead-based paint, and supports the Federal government's goal of eliminating lead poisoning by 2010. This rule was mandated to be in effect by 1996; however, the EPA is currently conducting a field study to conduct information to be used in finalizing the rule, and expects final publication in December 2007.

EPSDT Outreach Update

The final speaker was Brian Campbell, EPSDT Coordinator for the Department of Medical Assistance Services. Mr. Campbell spoke about actions DMAS is taking to ensure that Medicaid eligible children are receiving the required lead poisoning screenings. He told the subcommittee about DMAS' collaboration with the Virginia Department of Health in reaching Medicaid eligible children with elevated blood-lead levels, both through direct mailings and contact with physicians.

While the subcommittee was pleased to hear about the positive steps DMAS is taking with regards to Medicaid children, some members were concerned to hear that children enrolled in Virginia's FAMIS program were not receiving the same benefits. Mr. Campbell explained that while FAMIS children would be eligible for lead poisoning treatment, they are not required to be screened, as are Medicaid children. Non-Medicaid children are currently being screened based on certain risk factors developed by the Lead-Safe Virginia Program. When various subcommittee members expressed concern over children who are not being screened, Dr. Robert Stroube, Commissioner of the Department of Health, as well as a subcommittee member, agreed to provide more information on exactly who is being screened at the next meeting. The subcommittee agreed that this is an area that needs to be revisited.

Next meeting

The Joint Subcommittee decided to hold a final meeting in order to hear from the Health Department on the status of the Lead-Safe Virginia Program, and to discuss any possible recommendations the Joint Subcommittee may want to make this year. After offering time for public comment, of which there was none, the Chairman adjourned the meeting.