



HOUSE COMMITTEE ON APPROPRIATIONS

FISCAL NOTE

SENATE BILL NO. 522

PRINTERS NO. 1935
AS AMENDED BY: A05860

PRIME SPONSOR: Baker

COST / (SAVINGS)

FUND	FY 2022/23	FY 2023/24
General Fund	See Fiscal Impact	

SUMMARY: Senate Bill 522, Printer's Number 1935 as amended by A05860, establishes the Childhood Blood Lead Test Act. This legislation would be effective 60 days after enactment.

ANALYSIS: SB 522 provides that a health care provider shall consider possible lead exposure in a patient by evaluating risk factors and perform blood lead testing in accordance with recommendations of the Centers for Disease Control and Prevention and the American Academy of Pediatrics. With consent of a child's parent or legal guardian, a health care provider shall perform testing by age two, or by age six if a child has not been tested by age two. If a child's blood lead test indicates an elevated lead level, the health care provider shall perform a confirmatory venipuncture test within 12 weeks of the first test, with parental consent.

The bill provides that a pregnant woman shall receive a blood lead test if a health care provider identifies a risk factor in accordance with recommendations of the Centers for Disease Control and Prevention and the American College of Obstetricians and Gynecologists.

The bill requires health insurers, Medical Assistance (MA), and the Children's Health Insurance Program (CHIP) to cover at least one blood lead test per pregnancy for women with an identified risk factor and at least one test and a confirmatory test, if indicated, per child under age two. The bill provides that coverage for lead testing is subject to copayment, deductible, and coinsurance provisions to the same extent as other medical services covered by the health insurance policy or government program.

The bill also requires the Department of Health (DOH) to conduct a public information campaign to inform parents of young children and health care providers of the lead assessment and testing provisions.

FISCAL IMPACT: Enactment of this legislation will have no adverse fiscal impact on Commonwealth funds. The MA and CHIP programs already pay for blood lead testing for children as well as testing for adults when medically necessary. DOH can accommodate the requirements of this bill within its existing resources.

PREPARED BY: Nick McClure
House Appropriations Committee (R)

DATE: October 26, 2022

Estimates are calculated using the best information available. Actual costs and revenue impact incurred may vary from estimates.