

26:2-137.2

LEGISLATIVE HISTORY CHECKLIST
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(Lead poisoning)

NJSA: 26:2-137.2

LAWS OF: 1995 CHAPTER: 328

BILL NO: S1537

SPONSOR(S): Bassano

DATE INTRODUCED: October 17, 1994

COMMITTEE: ASSEMBLY Health & Human Services

SENATE: Health

AMENDED DURING PASSAGE: Yes Amendments during passage
Second reprint enacted denoted by superscript numbers

DATE OF PASSAGE: ASSEMBLY: December 18, 1995

SENATE: February 9, 1995

DATE OF APPROVAL: January 5, 1996

FOLLOWING STATEMENTS ARE ATTACHED IF AVAILABLE:

SPONSOR STATEMENT: Yes

COMMITTEE STATEMENT: ASSEMBLY: Yes

SENATE: Yes

FISCAL NOTE: No

VETO MESSAGE: No

MESSAGE ON SIGNING: No

FOLLOWING WERE PRINTED:

REPORTS: No

HEARINGS: No

974.90 New Jersey. Legislature. Senate. health and Human Services
P777 Committee.
1992n Public hearing on "the prevention and treatment of lead
poisoning in children," held 4-29-92. Trenton, 1992.

KBP:pp

[SECOND REPRINT]

SENATE, No. 1537

STATE OF NEW JERSEY

INTRODUCED OCTOBER 17, 1994

By Senators BASSANO, MATHEUSSEN, Kosco,
Gormley, Sinagra and Ciesla

1 AN ACT requiring screening of children for lead exposure,
2 amending P.L.1985, c.84, supplementing Title 26 of the Revised
3 Statutes and making an appropriation therefor.

4
5 BE IT ENACTED *by the Senate and General Assembly of the*
6 *State of New Jersey:*

7 1. (New section) The Legislature finds and declares that:

8 a. According to the New Jersey Department of Health,
9 630,000 children under the age of six are at risk of lead poisoning
10 in New Jersey and should be screened for elevated lead levels.
11 Of this number, the Department of Health estimates that 177,000
12 pre-school children are at particularly high risk of lead poisoning;

13 b. Approximately 70,000 pre-school children, or almost 10% of
14 the population of children under age six, are currently screened
15 for lead poisoning;

16 c. Screening is an essential element of the fight to reduce and
17 eventually eliminate childhood lead poisoning, and identification
18 of children in the early stages of lead exposure can prevent
19 children from suffering severe cases of lead poisoning;

20 d. A universal lead screening program will identify which
21 children require medical evaluation and treatment and will alert
22 parents about the need to identify lead hazards in their home;

23 e. A universal lead screening program that is integrated with
24 education and community outreach programs will raise public
25 consciousness about the insidious dangers of childhood lead
26 poisoning, and encourage parents to take preventive steps to
27 make their homes lead-safe and communities to strengthen lead
28 prevention programs; and

29 f. Universal lead screening and the universal reporting of lead
30 test results will provide the Department of Health and local
31 boards of health with information on high risk neighborhoods and
32 communities and can result in targeted lead hazard reduction
33 programs in the areas of greatest need.

34 2. (New section) As used in this act:

35 "Commissioner" means the Commissioner of Health;

36 "Department" means the Department of Health;

37 "Lead poisoning" means an elevated level of lead in the
38 bloodstream, as established by regulation of the department
39 pursuant to this act;

40 "Lead screening" means the application of a detection
41 technique to measure a child's blood lead level and determine the
42 extent of a child's recent exposure to lead;

EXPLANATION--Matter enclosed in bold-faced brackets [thus] in the
above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹ Senate SHH committee amendments adopted December 1, 1994.

² Assembly AHH committee amendments adopted December 4, 1995.

1 3. (New section) a. A physician ¹or registered professional
2 nurse, as appropriate,¹ shall perform lead screening on each of
3 his patients under six years of age to whom he provides health
4 care services unless the physician ¹or registered professional
5 nurse¹ has knowledge that the child has already undergone lead
6 screening in accordance with the requirements of this act. If the
7 physician ¹or registered professional nurse¹ or his staff cannot
8 perform the required lead screening, the physician ¹or registered
9 professional nurse¹ may refer the patient, in writing, to another
10 physician ¹or registered professional nurse¹, health care facility
11 or designated agency or program which is able to perform the
12 lead screening.

13 b. A health care facility licensed pursuant to P.L.1971, c.136
14 (C.26:2H-1 et seq.) which serves children and any other agency or
15 program that serves children and that is designated by the
16 commissioner to perform lead screening, shall perform lead
17 screening on each child under six years of age that the facility,
18 agency or program serves, unless the facility, agency or program
19 has knowledge that the child has already undergone lead
20 screening in accordance with the requirements of this act. If the
21 health care facility cannot perform the required lead screening,
22 the health care facility may refer the patient, in writing, to
23 another health care facility, physician, ¹registered professional
24 nurse,¹ or other designated agency or program which is able to
25 perform the lead screening.

26 c. If a physician¹, registered professional nurse,¹ or health
27 care facility, agency or program receives laboratory test results
28 that indicate that a child has lead poisoning, the physician¹,
29 registered professional nurse,¹ or health care facility, agency or
30 program shall notify, in writing, the parent or guardian of the
31 child about the test results and provide the parent or guardian
32 with an explanation in plain language of the significance of lead
33 poisoning. The physician¹, registered professional nurse,¹ or
34 health care facility, agency or program also shall take
35 appropriate measures to ensure that siblings or other members of
36 the household who are under the age of six are or have been
37 screened for lead exposure.

38 d. A physician¹, registered professional nurse,¹ or health care
39 facility, agency or program shall not be required to conduct lead
40 screening under this act if the parent or guardian of the child
41 objects to the testing in writing ²[on the grounds that the testing
42 conflicts with his religious tenets or practices]².

43 e. The department shall specify, by regulation, the lead
44 screening required under this act, including the age of the child
45 when initial screening shall be conducted, the time intervals
46 between screening, when follow-up testing is required, and the
47 methods that shall be used to conduct the lead screening.

48 f. The department shall develop a mechanism, such as
49 distribution of lead screening record cards or other appropriate
50 means, by which children who have undergone lead screening can
51 be identified by physicians¹, registered professional nurses¹ and
52 health care facilities, agencies and programs that perform lead
53 screening so as to avoid duplicate lead screening of children.

54 g. The department shall conduct a public information

1 campaign to inform parents of young children, physicians¹,
2 registered professional nurses¹ and other health care providers of
3 the lead screening requirements of this act.

4 h. The department, to the greatest extent possible, shall
5 coordinate payment for lead screening required pursuant to this
6 act with the State Medicaid program established pursuant to
7 P.L.1968, c.413 (C.30:4D-1 et seq.) and other federal children's
8 health programs so as to ensure that the State receives the
9 maximum amount of federal financial participation available for
10 the lead screening services provided pursuant to this act.

11 4. (New section) a. All lead screening blood samples collected
12 by a physician¹, registered professional nurse¹ or a health care
13 facility pursuant to this act shall be sent to a laboratory licensed
14 by the Department of Health, pursuant to the "New Jersey
15 Clinical Laboratory Improvement Act," P.L.1975, c.166
16 (C.45:9-42.26 et seq.), for analysis of blood lead levels.

17 b. A laboratory which performs a lead screening test pursuant
18 to this act shall report the test results to the department, the
19 local health department in the municipality in which the child
20 who is the subject of the test resides, and the physician¹,
21 registered professional nurse¹ or health care facility, agency or
22 program that submitted the specimen, within five business days
23 of obtaining the test result.

24 5. (New section) a. The department shall maintain a central
25 data base which shall include a record of all lead screening
26 conducted pursuant to this act. The data base shall include the
27 name, age and address of the child screened and any other
28 demographic data the department deems necessary. The data
29 base shall be geographically indexed in order to determine the
30 location of areas of relatively high incidence of lead poisoning.

31 b. The information reported to and compiled by the
32 department pursuant to this act is to be used only by the
33 department and such other agencies as may be designated by the
34 commissioner and shall not otherwise be divulged or made public
35 so as to disclose the identity of any child to whom it relates
36 without written parental consent; and to that end, the
37 information shall not be included under materials available to
38 public inspection pursuant to P.L.1963, c. 73 (C.47:1A-1 et seq.).
39 The department may, however, make such statistical reports
40 available using information compiled from the data base if the
41 name or other identifying information of the child screened is not
42 revealed.

43 6. The commissioner shall adopt rules and regulations pursuant
44 to the "Administrative Procedure Act," P.L.1968, c.410
45 (C.52:14B-1 et seq.) necessary to carry out the provisions of this
46 act.

47 7. Section 6 of P.L. 1985, c.84 (C.26:2-135) is amended to read
48 as follows:

49 6. The commissioner shall issue an annual report to the
50 Governor and the Legislature by October 1 of each year. The
51 report shall include a summary of the lead poisoning testing and
52 abatement program activities in the State during the preceding
53 fiscal year and any recommendations or suggestions for
54 legislative consideration.

1 This report shall be made available to local and State agencies
2 involved with case management and lead abatement, and to
3 interested members of the public.

4 (cf: P.L.1985, c.84, s.6)

5 8. There is appropriated \$95,000 from the General Fund to the
6 Department of Health to carry out the purposes of this act.

7 9. Section 4 of P.L.1985, c.84 (C.26:2-133) is repealed.

8 10. This act shall take effect on the 60th day after the date of
9 enactment.

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14 Requires screening of children for lead exposure; appropriates
15 \$95,000.

STATEMENT

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3 This bill requires all physicians, health care facilities and
4 agencies and programs which provide health care services to
5 children to screen all children under six years of age that they
6 serve for lead poisoning. The type of screening required and the
7 frequency of the screening shall be established by regulation of
8 the Department of Health.

9 The bill provides that if a physician or health care facility,
10 agency or program receives results that indicate that a child has
11 lead poisoning, the physician or health care facility, agency or
12 program shall notify, in writing, the parents or guardian of the
13 child about the test results and provide the parents or guardian
14 with an explanation in plain language of the significance of lead
15 poisoning. The physician or health care facility, agency or
16 program also shall take appropriate measures to ensure that
17 siblings or other members of the household who are under the age
18 of six are or have been screened for lead exposure.

19 A physician or health care facility, agency or program shall not
20 be required to conduct lead screening under this bill if the parent
21 or guardian of the child objects to the testing in writing on the
22 grounds that the testing conflicts with his religious tenets or
23 practices.

24 The bill requires that all laboratory test results be sent to the
25 Department of Health, the local health department in the
26 municipality in which the child who is the subject of the test
27 resides, and the physician or health care facility, agency or
28 program that submitted the specimen, within five business days
29 of obtaining the test result.

30 Under the provisions of the bill, the department is required to
31 maintain a confidential central data base which will include a
32 record of all lead screening conducted pursuant to this bill. Any
33 identifying information in the data base about a child cannot be
34 divulged or made public so as to disclose the identity of the child
35 without written parental consent.

36 The bill repeals Section 4 of P.L.1985, c.84 (C.26:2-133)
37 concerning testing for lead poisoning because the provisions of
38 that section are incorporated in this bill.

39 Finally, the bill appropriates \$95,000 to the Department of
40 Health to implement the provisions of the bill.

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45 Requires screening of children for lead exposure; appropriates
46 \$95,000.

ASSEMBLY HEALTH AND HUMAN SERVICES COMMITTEE

STATEMENT TO

[FIRST REPRINT]

SENATE, No. 1537

with committee amendments

STATE OF NEW JERSEY

DATED: DECEMBER 4, 1995

The Assembly Health and Human Services Committee favorably reports Senate Bill No. 1537 [1R] with committee amendments.

As amended by committee, this bill requires all physicians, registered professional nurses and health care facilities, agencies and programs which provide health care services to children to screen all children under six years of age that they serve for lead poisoning. The type of screening required and the frequency of the screening shall be established by regulation of the Department of Health (DOH).

The bill provides that if a physician, registered professional nurse or health care facility, agency or program receives results that indicate that a child has lead poisoning, the physician, registered professional nurse or health care facility, agency or program shall notify, in writing, the parents or guardian of the child about the test results and provide the parents or guardian with an explanation in plain language of the significance of lead poisoning. The physician, registered professional nurse or health care facility, agency or program also shall take appropriate measures to ensure that siblings or other members of the household who are under the age of six are or have been screened for lead exposure.

A physician, registered professional nurse or health care facility, agency or program shall not be required to conduct lead screening under this bill if the parent or guardian of the child objects to the testing in writing.

The bill requires that all laboratory test results be sent to DOH, the local health department in the municipality in which the child who is the subject of the test resides, and the physician, registered professional nurse or health care facility, agency or program that submitted the specimen, within five business days of obtaining the test result.

Under the provisions of the bill, DOH is required to maintain a confidential central data base which will include a record of all lead screening conducted pursuant to this bill. Any identifying information in the data base about a child cannot be divulged or made public so as to disclose the identity of the child without written parental consent.

The bill repeals Section 4 of P.L.1985, c.84 (C.26:2-133) concerning testing for lead poisoning because the provisions of that section are incorporated in this bill.

Finally, the bill appropriates \$95,000 to DOH to implement the provisions of the bill. According to an OLS fiscal note, DOH should be able to implement the provisions of this legislation within the limits of the \$95,000 appropriation, in view of the funds for lead screening activities already expended by DOH, local health departments and the Medicaid program in the Department of Human Services, as well as the availability of coverage for lead screening by children's private health insurance in some cases.

The committee amended the bill to delete the requirement that a parent only may object to the testing on the grounds that the testing conflicts with his religious tenets or practices. As amended, the bill does not specify the grounds on which a parent may object to the testing and only requires that the parent object in writing.

As reported by the committee, this bill is identical to Assembly Bill No. 2442 Aca (Wright), which the committee also reported on this date.

SENATE HEALTH COMMITTEE

STATEMENT TO

SENATE, No. 1537

with committee amendments

STATE OF NEW JERSEY

DATED: December 1, 1994

The Senate Health Committee favorably reports Senate Bill No. 1537 with committee amendments.

As amended by committee, this bill requires all physicians, registered professional nurses and health care facilities, agencies and programs which provide health care services to children to screen all children under six years of age that they serve for lead poisoning. The type of screening required and the frequency of the screening shall be established by regulation of the Department of Health.

The bill provides that if a physician, registered professional nurse or health care facility, agency or program receives results that indicate that a child has lead poisoning, the physician, registered professional nurse or health care facility, agency or program shall notify, in writing, the parents or guardian of the child about the test results and provide the parents or guardian with an explanation in plain language of the significance of lead poisoning. The physician, registered professional nurse or health care facility, agency or program also shall take appropriate measures to ensure that siblings or other members of the household who are under the age of six are or have been screened for lead exposure.

A physician, registered professional nurse or health care facility, agency or program shall not be required to conduct lead screening under this bill if the parent or guardian of the child objects to the testing in writing on the grounds that the testing conflicts with his religious tenets or practices.

The bill requires that all laboratory test results be sent to the Department of Health, the local health department in the municipality in which the child who is the subject of the test resides, and the physician, registered professional nurse or health care facility, agency or program that submitted the specimen, within five business days of obtaining the test result.

Under the provisions of the bill, the department is required to maintain a confidential central data base which will include a record of all lead screening conducted pursuant to this bill. Any identifying information in the data base about a child cannot be divulged or made public so as to disclose the identity of the child without written parental consent.

The bill repeals Section 4 of P.L.1985, c.84 (C.26:2-133) concerning testing for lead poisoning because the provisions of that section are incorporated in this bill.

Finally, the bill appropriates \$95,000 to the Department of Health to implement the provisions of the bill.

The committee amended the bill to specify that registered professional nurses, as well as physicians, shall be required to perform lead screening on their patients under six years of age.