

Senate, March 23, 1998. The Committee on Public Health reported through SEN. HARP, 10th DIST., Chairman of the Committee on the part of the Senate, that the bill ought to pass.

AN ACT CONCERNING CHILDHOOD LEAD POISONING REPORTING.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 19a-110 of the general statutes, as
2 amended by section 23 of public act 97-9 of the
3 June 18 special session, is repealed and the
4 following is substituted in lieu thereof:

5 (a) Each institution licensed under the
6 provisions of sections 19a-490 to 19a-503,
7 inclusive, AS AMENDED, and each private clinical
8 laboratory [registered] LICENSED under section
9 19a-30 shall, within forty-eight hours of receipt
10 of knowledge thereof, report to the Commissioner
11 of Public Health, and to the director of health of
12 the town, city or borough in which the person
13 resides: [, the] (1) THE name, FULL RESIDENCE
14 address, [and] date of birth, [of, and such other
15 relevant information as said commissioner may
16 require concerning] GENDER, RACE AND ETHNICITY OF
17 each person found to have a level of lead in the
18 blood equal to or greater than ten micrograms per
19 deciliter of blood or any other abnormal body
20 burden of lead; (2) THE NAME, ADDRESS AND
21 TELEPHONE NUMBER OF THE HEALTH CARE PROVIDER WHO
22 ORDERED THE TEST; (3) THE SAMPLE COLLECTION DATE,
23 ANALYSIS DATE, TYPE AND BLOOD LEAD ANALYSIS

24 RESULT; AND (4) SUCH OTHER INFORMATION AS THE
25 COMMISSIONER MAY REQUIRE. Any institution or
26 laboratory making such a report in good faith
27 shall be immune from any civil or criminal
28 liability that otherwise might be incurred from
29 the making of such report. The commissioner, after
30 consultation with the [Chief Information Officer]
31 EXECUTIVE DIRECTOR OF THE OFFICE OF INFORMATION
32 AND TECHNOLOGY, shall determine the method AND
33 FORMAT of transmission of data contained in said
34 report.

35 (b) EACH INSTITUTION OR LABORATORY THAT
36 CONDUCTS LEAD TESTING PURSUANT TO SUBSECTION (a)
37 OF THIS SECTION SHALL, AT LEAST MONTHLY, SUBMIT TO
38 THE COMMISSIONER OF PUBLIC HEALTH A COMPREHENSIVE
39 REPORT THAT INCLUDES: (1) THE NAME, FULL RESIDENCE
40 ADDRESS, DATE OF BIRTH, GENDER, RACE AND ETHNICITY
41 OF EACH PERSON TESTED PURSUANT TO SUBSECTION (a)
42 OF THIS SECTION REGARDLESS OF THE LEVEL OF LEAD IN
43 THE BLOOD; (2) THE NAME, ADDRESS AND TELEPHONE
44 NUMBER OF THE HEALTH CARE PROVIDER WHO ORDERED THE
45 TEST; (3) THE SAMPLE COLLECTION DATE, ANALYSIS
46 DATE, TYPE AND BLOOD LEAD ANALYSIS RESULT; (4)
47 LABORATORY IDENTIFIERS; AND (5) SUCH OTHER
48 INFORMATION AS THE COMMISSIONER MAY REQUIRE. ANY
49 INSTITUTION OR LABORATORY MAKING SUCH A REPORT IN
50 GOOD FAITH SHALL BE IMMUNE FROM ANY CIVIL OR
51 CRIMINAL LIABILITY THAT OTHERWISE MIGHT BE
52 INCURRED FROM THE MAKING OF SUCH REPORT. THE
53 COMMISSIONER, AFTER CONSULTATION WITH THE
54 EXECUTIVE DIRECTOR OF THE OFFICE OF INFORMATION
55 AND TECHNOLOGY, SHALL DETERMINE THE METHOD AND
56 FORMAT OF TRANSMISSION OF DATA CONTAINED IN SAID
57 REPORT.

58 (c) WHENEVER AN INSTITUTIONAL LABORATORY OR
59 PRIVATE CLINICAL LABORATORY CONDUCTING BLOOD LEAD
60 TESTS PURSUANT TO THIS SECTION REFERS A BLOOD LEAD
61 SAMPLE TO ANOTHER LABORATORY FOR ANALYSIS, THE
62 LABORATORIES MAY AGREE ON WHICH LABORATORY WILL
63 REPORT IN COMPLIANCE WITH SUBSECTIONS (a) AND (b)
64 OF THIS SECTION, BUT BOTH LABORATORIES SHALL BE
65 ACCOUNTABLE TO INSURE THAT REPORTS ARE MADE. THE
66 REFERRING LABORATORY SHALL INSURE THAT THE
67 REQUISITION SLIP INCLUDES ALL OF THE INFORMATION
68 THAT IS REQUIRED IN SUBSECTIONS (a) AND (b) OF
69 THIS SECTION AND THAT THIS INFORMATION IS
70 TRANSMITTED WITH THE BLOOD SPECIMEN TO THE
71 LABORATORY PERFORMING THE ANALYSIS.

72 [(b)] (d) The director of health of the town,
73 city or borough shall provide or cause to be
74 provided, to the parent or guardian of a child
75 reported, pursuant to subsection (a) of this
76 section, with information describing the dangers
77 of lead poisoning, precautions to reduce the risk
78 of lead poisoning and laws and regulations
79 concerning lead abatement. Said information shall
80 be developed by the Department of Public Health
81 and provided to each local and district director
82 of health.

83 PH COMMITTEE VOTE: YEA 22 NAY 0 JF

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"THE FOLLOWING FISCAL IMPACT STATEMENT AND BILL ANALYSIS ARE PREPARED FOR THE BENEFIT OF MEMBERS OF THE GENERAL ASSEMBLY, SOLELY FOR PURPOSES OF INFORMATION, SUMMARIZATION AND EXPLANATION AND DO NOT REPRESENT THE INTENT OF THE GENERAL ASSEMBLY OR EITHER HOUSE THEREOF FOR ANY PURPOSE."

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FISCAL IMPACT STATEMENT - BILL NUMBER SB 42

STATE IMPACT	Minimal Cost, Can Be Absorbed Within Anticipated Budgetary Resources, see explanation below
MUNICIPAL IMPACT	None
STATE AGENCY(S)	Department of Public Health, Department of Information and Technology, University of Connecticut Health Center

EXPLANATION OF ESTIMATES:

The volume of data to be submitted to the Department of Public Health's Childhood Lead Poisoning Prevention Program will rise, given passage of this bill. It is anticipated that the agency will be able to accommodate any resulting increase in workload within its anticipated budgetary resources.

The University of Connecticut Health Center will be able to comply with the new reporting requirements within its anticipated budgetary resources.

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OLR BILL ANALYSIS

SB 42

AN ACT CONCERNING CHILDHOOD LEAD POISONING REPORTING

SUMMARY: This bill increases the information licensed blood-testing laboratories and institutions must report within 48 hours concerning blood specimens with lead

levels over 10 micrograms per deciliter or other abnormal lead elevations. It also requires them to report at least monthly on the blood tests they perform regardless of lead levels.

It allows licensed facilities that refer blood specimens to other laboratories and institutions to agree which one will file the required reports but makes both accountable for the reports. (It does not specify a penalty for failure to file.)

The bill replaces "registered clinical laboratories" with "licensed clinical laboratories" to conform to existing law requiring such facilities to be licensed. It replaces "chief information officer" with "executive director of the Office of Information and Technology" (see COMMENT) in reference to whom the Department of Public Health (DPH) commissioner must consult with in determining the method for transmitting blood lead level reports. It also allows them to determine the transmission format.

EFFECTIVE DATE: October 1, 1998

FURTHER EXPLANATION

Reporting Elevated Blood Lead Levels

The bill increases the information licensed blood-testing facilities must report to the DPH and local health directors within 48 hours of detecting elevated blood lead levels. By law they must report the name, address, and date of birth of the person tested. The bill specifies the person's full residence address rather than the address and requires:

1. the gender, race, and ethnicity of the person;
2. the name, address and telephone number of the health care provider who ordered the test; and
3. the sample date, analysis date, blood type, and lead level.

The bill allows the commissioner to require any, rather than relevant, additional information.

Monthly Reports

The bill requires the laboratories and institutions to report to the DPH commissioner at least monthly on blood-lead tests they perform regardless of lead levels of the specimens (see COMMENT).

The report must include:

1. the name , address, date of birth, gender, race, and ethnicity of each person tested;
2. the name, address, and telephone number of the provider who ordered the test;
3. the sample date, analysis date, blood type, and lead level;
4. the laboratory name; and
5. other information required by the DPH commissioner.

It releases labs and institutions filing in good faith from civil or criminal liability in the same way as they are for the existing reports.

Blood Specimen Referrals

The bill allows licensed laboratories or institutions referring specimens to other laboratories or institutions to agree which will file the required reports but makes both accountable to insure that they are filed. It requires referring laboratories (and institutions) to insure that the requisition slip accompanying the specimen contains the information necessary to complete the reports.

COMMENT

Incorrect Title

PA 97-9 (June 18 Special Session) replaced the "Office of Information and Technology" with the "Department of Information Technology." Thus the title should read "chief information officer of the Department of Information Technology."

Incorrect Cite

The bill refers to facilities conducting tests and people tested pursuant to CGS § 19a-110(a); that section does not require or call for testing.

COMMITTEE ACTION

Public Health Committee

Joint Favorable Report
Yea 22 Nay 0