Medical Coverage Policy | Venipuncture for State Mandated Lead Screening



EFFECTIVE DATE: 09 | 01 | 2003

POLICY LAST UPDATED: 05 | 03 | 2016

OVERVIEW

This policy addresses state mandated coverage guidelines for the venipuncture for blood specimen collection to be sent to a state-approved laboratory for lead screening (Rhode Island General Law 23-24.6-9).

MEDICAL CRITERIA

Not applicable

PRIOR AUTHORIZATION

Prior Authorization is not required.

POLICY STATEMENT

Commercial Products

Venipuncture for blood specimen collection for lead testing is covered and separately reimbursed when filed with a -32 modifier.

BlueCHiP for Medicare

Not applicable

Rhode Island-mandated benefits generally do not apply to BlueCHiP for Medicare members. This mandate is for children under age 6 who are not eligible for Medicare.

COVERAGE

Benefits may vary between groups/contracts. Please refer to the appropriate Benefit Booklet, Evidence of Coverage, or Subscriber Agreement for applicable physician services/lab coverage/benefits.

BACKGROUND

Lead is a heavy metal found naturally in the environment as well as in many common consumer products. Though it serves no purpose in the human body, most people have a small amount of it in their bodies because it's so prevalent in our surroundings. In adults, a low level of lead exposure isn't considered dangerous. However, in babies and young kids whose brains are still developing, even a small amount of lead can cause learning disabilities and behavioral problems, as well as anemia, hearing loss, kidney problems, and physical and developmental delays. At higher levels, lead exposure can cause seizures, coma, and even death. According to the American Academy of Pediatrics, one million U.S. children have elevated lead levels in their blood.

A lead screening is conducted by a simple blood test. A health professional will usually draw the blood from a vein. For an infant, the blood may be obtained by puncturing the heel with a small needle. If a test shows a significant elevation of lead levels in a child's blood, another sample will be taken to confirm the results.

Lead exposure may come from a number of sources, as detailed by the following list from the Centers for Disease Control and Prevention (CDC):

• Lead-based paint in older homes that is deteriorating, creating dust and paint chips easily ingested by young children.

- Lead-based paint in homes that is disturbed during renovation or remodeling.
- Lead-based paint in homes that is exposed, on a surface easily chewed by a young child (such as a window sill).
- Lead-contaminated soil.
- Operating or abandoned industrial sites and smelters. Although lead pollution has been greatly reduced, some soil and dust contamination can still result.
- Occupations and hobbies. Children can be exposed to lead-contaminated dust on parents' clothes.
- Use of lead-containing ceramics for cooking, eating or drinking.
- Use of traditional home remedies or cosmetics that contain lead.

§ 23-24.6-9 Reimbursement by third party payers. — Screening for lead poisoning and lead screening related services for children under six (6) years of age as required by department regulations and diagnostic evaluations for lead poisoning for children under six (6) years of age, including but not limited to confirmatory blood lead testing, shall be a covered health benefit and be reimbursable under any general or blanket policy of accident or health insurance offered by an insurer except for supplemental policies which only provide coverage for specific diseases, hospital indemnity medicare supplements, or other supplemental policies. The department of human services shall pay for the lead screening and lead screening related and diagnostic evaluation services where the patient is eligible for medical assistance under the provisions of chapter 8 of title 40. The department of health shall pay for the lead screening and lead screening related and diagnostic evaluation services where the patient is not covered by any health insurance. All companies which are self insured for health care services will be encouraged by the department to participate as other insurers.

CODING

Commercial Products

The following codes are covered: 36415-32 36416-32

RELATED POLICIES

Preventive Services for Commercial Members

PUBLISHED

Provider Update, July 2015 Provider Update, October 2015 Provider Update, September 2014 Provider Update, September 2013 Provider Update, July 2012 Provider Update, March 2011 Provider Update, April 2010

REFERENCES

- 1. Rhode Island General Law (RIGL). 23-24.6-9 Lead Poisoning Prevention Act. http://webserver.rilin.state.ri.us/Statutes/TITLE23/23-24.6/23-24.6-9.HTM
- 2. Lead Screening. http://www.firstsigns.org/screening/lead.htm
- 3. Blood Test: Lead. http://kidshealth.org/parent/system/medical/test_lead.html
- State of Rhode Island Department of Health (DOH). Healthy Homes and Lead Poisoning Information for Healthcare Providers. http://www.health.ri.gov/healthrisks/poisoning/lead/for/providers/

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and/or the employer agreement, and those documents will supersede the provisions of this medical policy. For information on membenefits, call the provider call center. If you provide services to a member which are determined to not be medically necessary (or in medically necessary services which are non-covered benefits), you may not charge the member for the services unless you have ir member and they have agreed in writing in advance to continue with the treatment at their own expense. Please refer to your provider that their own expense is the provider of the services unless that their own expense is the provider of the services unless that their own expense is the provider of the services unless that their own expense is the provider of the services unless that their own expense is the provider of the services unless that their own expense is the provider of the services unless that their own expense is the provider of the services unless that their own expense is the provider of the services unless that their own expense is the provider of the services unless that their own expense is the provider of the services unless that their own expense is the provider of the services unless that their own expense is the provider of the services unless that their own expense is the provider of the services unless that the provider of the services that the provider of the services unless that the provider of the services that the provider of	some cases
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