

OFFICE OF THE SECRETARY OF STATE

SHEMIA FAGAN
SECRETARY OF STATE

CHERYL MYERS
DEPUTY SECRETARY OF STATE



ARCHIVES DIVISION

STEPHANIE CLARK
DIRECTOR

800 SUMMER STREET NE
SALEM, OR 97310
503-373-0701

PERMANENT ADMINISTRATIVE ORDER

DMAP 54-2022

CHAPTER 410

OREGON HEALTH AUTHORITY

HEALTH SYSTEMS DIVISION: MEDICAL ASSISTANCE PROGRAMS

FILED

06/07/2022 8:19 AM
ARCHIVES DIVISION
SECRETARY OF STATE
& LEGISLATIVE COUNSEL

FILING CAPTION: Change The Capillary Blood Level Screening Rate To Match The CDC Recommendation

EFFECTIVE DATE: 06/07/2022

AGENCY APPROVED DATE: 06/03/2022

CONTACT: Nita Kumar

503-847-1357

hsd.rules@dhsosha.state.or.us

500 Summer St NE

Salem, OR 97301

Filed By:

Nita Kumar

Rules Coordinator

AMEND: 410-130-0246

NOTICE FILED DATE: 04/01/2022

RULE SUMMARY: Amend OAR 410-130-0246 to change 5 micrograms per deciliter to 3.5 micrograms per deciliter

CHANGES TO RULE:

410-130-0246

Lead Screening

(1) All children enrolled in the Oregon Health Plan, including Fee-for-Service and MCEs, must have blood lead screening tests. Program coverage must have blood lead screening tests at age 12 months and 24 months. Any child between ages 24 and 72 months must receive one blood lead screening test. Completion of a risk assessment questionnaire does not meet the lead screening test requirement. Medicaid.¶

(2) Method of Blood Collection: A single venous or capillary blood draw is acceptable for the blood lead screening test. A result of 3.5 micrograms per deciliter from either method is considered a negative result. A capillary blood lead level greater than or equal to 3.5 micrograms per deciliter with either a venous draw or a second capillary draw within 12 weeks.¶

(3) Lead poisoning in children under 18 years of age and pregnant or lactating women is defined as a blood lead level greater than or equal to 3.5 micrograms per deciliter from a venous draw or two capillary blood lead tests greater than or equal to 3.5 micrograms per deciliter drawn within 12 weeks. 333-017-0000(18).¶

(4) Billing of laboratory services is covered in: OAR 410-130-0680.¶

(a) For the collection of blood, use CPT 36415 for a venipuncture sample or CPT 36416 for capillary puncture samples;¶

(b) To bill for venipuncture or capillary blood lead screening, use Current Procedural Terminology (CPT) code 83655.¶

(5) All children, pregnant and lactating women with lead poisoning are eligible to receive follow up case management services. For more information, see the Oregon Health Authority Public Health Division's Oregon Lead Poisoning Investigative Guidelines at:

<https://www.oregon.gov/oha/PH/HealthyEnvironments/HealthyNeighborhoods/LeadPoisoning/CountyHealthDepartment>

(6) To bill for comprehensive lead investigation, use HCPCS code T1029. Payment for code T1029 includes the home investigation and management services provided after the home investigation is completed. The Division limits reimbursement of T1029 to children enrolled in Fee-for-Service, the service is payable by the Division for dates of service through September 30, 2020. Effective October 1, 2020, for children enrolled in managed care plans, the service is payable by the managed care plan.

Statutory/Other Authority: ORS 413.042

Statutes/Other Implemented: ORS 414.025, 414.065, 414.150