

OFFICE OF THE SECRETARY OF STATE

LAVONNE GRIFFIN-VALADE  
SECRETARY OF STATE

CHERYL MYERS  
DEPUTY SECRETARY OF STATE  
AND TRIBAL LIAISON



ARCHIVES DIVISION

STEPHANIE CLARK  
DIRECTOR

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

## PERMANENT ADMINISTRATIVE ORDER

### DMAP 112-2024

CHAPTER 410

OREGON HEALTH AUTHORITY

HEALTH SYSTEMS DIVISION: MEDICAL ASSISTANCE PROGRAMS

**FILED**

07/11/2024 10:19 AM  
ARCHIVES DIVISION  
SECRETARY OF STATE  
& LEGISLATIVE COUNSEL

FILING CAPTION: The public health authorities are made eligible to claim for the reimbursement of lead investigation.

EFFECTIVE DATE: 07/11/2024

AGENCY APPROVED DATE: 07/10/2024

CONTACT: Martha Martinez-Camacho

503-559-0830

hsd.rules@oha.oregon.gov

500 Summer Street NE

Salem, OR 97301

Filed By:

Martha Martinez-Camacho

Rules Coordinator

ADOPT: 410-151-0040

NOTICE FILED DATE: 04/29/2024

RULE SUMMARY: All children enrolled in the Oregon Health Plan, including Fee-for-Service and MCEs, must have blood lead screening tests at age 12 months and 24 months. Any child between ages 24 and 72 months who has not had a blood lead screening test at age 24 months or 24 months since their previous blood lead screening test must receive one. Completion of a risk assessment questionnaire does not meet the lead screening requirement. Medicaid.

CHANGES TO RULE:

#### 410-151-0040

##### Lead Screening

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

(2) Method of Blood Collection: A single venous or capillary blood draw is acceptable for the blood lead screening test. A capillary blood lead level greater than or equal to 3.5 micrograms per deciliter must be confirmed with either a venous draw or a second capillary draw within 12 weeks of each other in children under 18 years of age and pregnant or lactating women.

(3) Blood lead levels 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 of each other in children under 18 years of age and pregnant or lactating women require case management by the local public health authority. See the definition of "Blood lead level at or above the blood lead reference level."

(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) Health care providers shall report all cases or suspected cases when blood lead levels are at or above the blood lead reference level to the local public health authority within one working day and within seven days when any blood lead level tests are performed including the result. OAR 333-018-0015(3)(d).

(6) All children, pregnant and lactating women with lead poisoning are eligible to receive follow up case management services. 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>

(7) The local public health authorities are eligible for investigation reimbursements. To bill for comprehensive lead investigation, use Current Procedural Terminology (CPT) code T1029. Payment for code T1029 includes the home investigation and any follow-up case management services provided after the home investigation.

Authority limits reimbursement of T1029 to one time per dwelling. For clients enrolled in Fee-for-Service, the service is pay service through September 30, 2020. Effective October 1, 2020 for members enrolled in managed care plans, the service is  
Statutory/Other Authority: ORS 413.042  
Statutes/Other Implemented: ORS 414.025, 414.065, 414.150