

## An important message from **Provider Relations**







February 28, 2018

This communication contains important information regarding childhood lead assessments, testing and Home State Health's Lead Case Management Program.

MO HealthNet's Lead Risk Assessment Guide must be completed during each HCY/EPSDT Screening performed between the child's ages of 6 months to 72 months. The guide is located here: <a href="http://health.mo.gov/living/environment/lead/pdf/HCYLeadRiskAssessmentGuide.pdf">http://health.mo.gov/living/environment/lead/pdf/HCYLeadRiskAssessmentGuide.pdf</a>. Regardless of risk, a blood lead testing is required at 12 months and 24 months. A blood test is required annually in all high risk areas.

## **Lead Case Management Updates**

## Reminder

Lead Screenings need to be performed <u>PRIOR</u> to the child's second birthday. If the screen is done after the second birthday, it will not be compliant for HEDIS or Missouri standards. For more information, please access our HEDIS Quick Reference Guide located at <a href="https://www.homestatehealth.com/content/dam/centene/home-state-health/pdfs/2017%20HEDIS%20Guidelines.pdf">https://www.homestatehealth.com/content/dam/centene/home-state-health/pdfs/2017%20HEDIS%20Guidelines.pdf</a>

- When a CAPILLARY result is 9.5 or greater, please send the child for a <u>VENOUS</u> retest <u>immediately</u>! The State will ask for a retest and it can be difficult to reach the family to get the child back in.
- If doing capillary testing in the office, please be sure the staff is following best practice to obtain the specimen, as outlined by the CDC:
  - 1) Have the child wash their hands, for 2 minutes, with soap and warm water.
  - 2) Dry the hands gently with a clean paper towel.
  - 3) Wipe the finger to be used with alcohol, prior to performing the finger stick.
  - 4) Perform a heel stick for infants under 1 year of age.
  - 5) Do not allow the cleaned finger to touch any surface, including the child's other fingers or palm of hand.
  - 6) Massage the finger gently from proximal to distal to increase blood flow to the finger.
  - 7) Puncture lateral to the ball of the finger.
  - 8) Remove the first drop of blood with a sterile gauze/cotton ball.
  - 9) Avoid excessive squeezing of the finger.
  - 10) Do not collect blood that has run down the side of the finger.

Questions? Call the Lead Case Management team at 636-735-4553.