



Conference Call with Primary Contacts for EBL NCM Project

Thursday 2/15/18

1:00 PM-2:00 PM

Call-in information: **877-873-8018 Access Code: 8282547#**

1. Welcome and Introductions MDHHS Attendees: Angela Medina, Kendorah Lockhart, Veronica Tijerina, Tom Largo, Karen Lishinski, Martha Stanbury, Sonya Frick
 - a. Mission – To prevent childhood lead poisoning across the state through surveillance, outreach, and health services
 - b. Vision – No child in Michigan suffers from lead poisoning
 - c. New CLPPP Epidemiologist – Liz Vickers, vickerse@michigan.gov, 517-284-9023
2. FY18 Quarterly Reimbursement Submissions
 - a. Quarter 2 (January 1 – March 31, 2018) Due April 30 – During the audit, Angela may send out e-mails to LHDs requesting missing information needed for approval of the reimbursements. Please follow-up with her if you have any questions on what she is requesting. This highlights why it's important to notify CLPPP with any changes in lead staff at the LHD so CLPPP can ensure they are connecting with the correct LHD contact.
 - b. Billable HVs – In order for the home visit to be billable, it must take place at the home, it can't take place in a public location or the LHD. If the nurse is not invited into the home, but provides robust education and encourages testing to the parent, it can that be billed. Reminder, for initial visits, LHDs can bill for each sibling separately, but subsequent visits will count as one visit for the set of siblings.
 - c. Retroactive Medicaid – Per Medicaid, retroactive Medicaid enrollment is possible and common. However, it is something that Medicaid does on their end, and the eligibility dates will show up in CHAMPS. So potentially, if you had a home visit in July, but the child enrolled in Medicaid in August, if the eligibility dates in CHAMPS go back to July, then the home visit can be billable. CLPPP checks eligibility by the dates in CHAMPS.
3. Rounding of Test Results – continuing to working to work on providing LHDs with unrounded numbers. Will update when an official decision has been made by MDHHS administration.
4. BLL \geq 45 $\mu\text{g}/\text{dL}$ – Karen recommends that children needing chelation be treated at Children's Hospital in Detroit. They provide inpatient IV chelation and Dr. Bhambhani who runs the lead clinic and has been doing the therapy for many years. The families can apply for transportation through their MHP and CSHCS. Kindra Reeser-Smith with Barry-Eaton HD offered the Family Phone Line at 800-359-3722 for Transportation. Amy Surma with City of Detroit HD states that

the family can always call and have an ambulance take them to Children's. If you need assistance contact Karen at 517-284-4824.

5. **HHL PSS Veronica/Kendorah**

- a. In-Person Trainings – Will be offered this fall. A survey will be sent out to LHDs, in the next couple months, to assess what is needed in the training.
 - b. User Access – Users are required to log in to HHL PSS monthly. If users do not log in for 3 consecutive months they will lose their access and will be required to take a quiz to get it back.
 - c. Address Changes – If you cannot find a test result in HHL PSS call Veronica at 517-284-4821. Veronica will add the result if it is 30 or above. If the result is under 30 we need to allow 3 weeks for it process through our system. Please **DO NOT** add the result yourself, this creates duplicate records, and if the result causes a case to open and is incorrect for any reason the CLPPP will have to completely delete the child's record and create a new one.
6. Medicaid Lead Hazard Control FY19 RFP – MDHHS Healthy Homes Section – RFP is for community organization to provide residential lead hazard control services to Medicaid enrolled residents. Grants are available for up to \$1.5 million. Healthy Homes hopes to fund up to 2 grantees to provide these services in MI communities. More information is available in EGrAMS and see attached press release from April 10th. Questions must be submitted to Courtney Wisinski at wisinskic@michigan.gov by April 16th. Applications are due by May 15th. Program runs from 10/01/18 to 09/30/19. There will be an automatic renewal for those already receiving the grant and meeting their benchmarks.
7. MCIR Updates – Updates in MCIR related to blood lead information. CLPPP will send detailed information on this out to LHDs.
8. Other Updates/Reminders
- a. CLEEC Public Forums – Child Lead Exposure Elimination Commission is working with Kent, DHD10, Detroit, Wayne, and Jackson health departments to put on regional public forums to get feedback on the commission's action plan. Dates/times TBD, but likely will take place in May/June. CLPPP will send out info on these forums once the dates/times are finalized.
 - b. CDC Training – Spots for this year are filled, but CLPPP will notify LHDs when this training takes place in 2019. Usually offered two times a year.
9. Roll Call time for LHDs to share what is working well, barriers they are facing, ask questions to CLPPP, and answer the below ABLES question.
- a. Adult Blood Lead Exposure Surveillance (ABLES) Take-home Lead – ABLES – 517-353-1846, www.oem.msu.edu. CLPPP exploring the idea of developing a more prescribed way of carrying out follow-up with EBL adults including a script for the telephone call and follow-up mailing, and an excel spreadsheet template for tracking activities. Questions: do LHDs recall getting any reports from Karen of EBL adults with children at home? If yes, do they routinely follow-up with the adult to encourage testing of the children? If yes, successes or problems doing this? Then, for all LHDs (whether they do follow-up now or not) if we in CLPPP developed a more prescribed project for how to handle this, would they be interested, or do they think doing what they do now is fine, or would they prefer that CLPPP manage the follow-up with EBL adults with children at home?

- b. Questions for MDHHS CLPPP – [When will applicants be notified of CLEEC selection of innovative grants? – next week](#)

Next Conference Call – Thursday, June 21st, 2018 from 1-2 p.m.