



# Lead Screening and Wyoming's Children

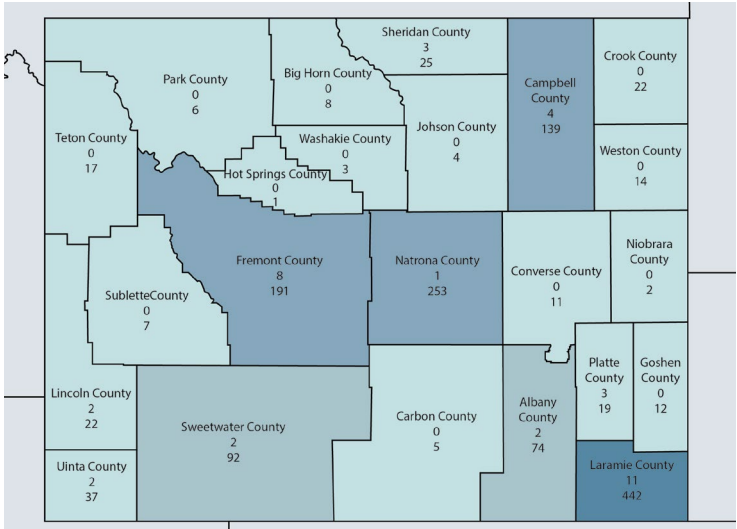
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One of the common questions I receive is, “Why does Wyoming Medicaid want lead levels screened at 12 and 24 months of age if the screening questionnaire shows low risk for lead poisoning?” The short answer has been that the Centers for Medicare and Medicaid Services (CMS) considers every Medicaid child to be at risk and requests screening.

Because CMS asks for the information, each state has to report their compliance.

Wyoming consistently has one of the lowest rates of lead screening in the nation. In 2019, 6,207 1- to 2-year-olds in Wyoming were eligible for lead screening. Of these, 1,384 were screened and 38 were reported as “lead poisoning” defined as having a lead level of 5 or greater (see figure).

Of those counties where routine screening is occurring, we see an incidence of 2 to 4 percent screened with the diagnosis of lead poisoning. At the



**Lead Screening and Lead Poisoning by County in 2019**  
Map indicates county-wise data on ‘lead screening’ and lead ‘poisoning.’  
**Top number:** Lead Poisoning. **Bottom number:** Lead Screening  
*Source: Wyoming Department of Health*

same time, however, many counties have almost no lead screening.

Many physicians feel there is no lead problem in Wyoming. How do we know that to be true if we are not screening?

According to a 2016 position paper of the American Academy of Pediatrics Council on Environmental Health, there are problems with any detectable level of lead. Their position paper concludes that low-level lead exposure, even at blood lead concentrations below 5 µg/dL (50 ppb), is a causal risk factor for diminished intellectual and academic abilities, higher rates of neurobehavioral disorders such as hyperactivity and attention deficits, and lower birth weight in children.

No effective treatments ameliorate the permanent developmental effects of lead toxicity. When this data was presented to our Medical Advisory Committee, they asked Medicaid to help raise awareness of this issue and to promote

increased lead screening for at least two years. The idea was to gain more insight into what the real risks of lead exposure are across the state.

When lead screening required venipuncture, there was much greater resistance to ordering lead screening. Fortunately, screening can now be done on a capillary sample. Only those who screen positive require a confirmatory venipuncture to be ordered.

Wyoming Medicaid pays code 83655 at \$14.84 for lead testing, and a quick search on the internet shows you can buy the reagents at around \$7 per test. Some equipment providers will supply the machine at no cost if you purchase a monthly supply of tests.

We’re asking you to please help us improve our screening rates for the good of Wyoming and its citizens. The risk of ignoring this problem is just too high.

No effective treatments ameliorate the permanent developmental effects of lead toxicity.

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