

## MCEH CoIIN Change Package Michigan State Team

**Key:**

- The changes listed here are the changes that the **Michigan** state team decided to test throughout the CoIIN. *This is not the complete MCEH CoIIN Change Package.*
- The majority of the changes that Michigan decided to test have been ranked by “leverage” from 1 (low leverage, not very important) to 5 (high leverage, very important). You will find these rankings in the third, right-most column of the Michigan State Team MCEH CoIIN Change Package.
- Under each Primary Driver heading there is a short “recommendations” section that is specific to that primary driver. This data was gathered at the MCEH CoIIN Harvest on 5/5/2020.
- **Text in red highlights specific activities/adaptations to each MCEH CoIIN change idea that Michigan performed.**

<b>Primary Driver 1: Clinical Settings</b>		
<p><b>Recommendations:</b></p> <ul style="list-style-type: none"> <li>• Use various methods of provider education, such as online training module, toolkits, and one-on-one public health detailing.</li> <li>• Pilot projects for screening for pregnant women. We had three pilot questionnaires and received valuable feedback before we developed our statewide screening questions</li> <li>• Establish strong relationships with Medicaid representation - they can help strategize data reporting to increase testing rates with providers</li> <li>• Provide local health departments (LHDs) with jurisdiction level reporting on blood lead testing so they can target outreach</li> <li>• Allow ample time for launching a statewide media campaign; don't rush it</li> <li>• Streamline definitions of elevated blood lead levels (EBLLs) - be consistent across all policies/laws/partners</li> </ul>		
Secondary Driver	Change Idea	Rank Change Idea from 1-5 1 = low leverage 5 = high leverage
<b>Prevention and Mitigation</b>	Provide training for pediatricians, family doctors, and care coordinators on signs and symptoms of lead exposure, treatment protocols, community resources (Head Start, Parent Training & Information Centers, etc.), navigating school accommodations, and local reimbursement processes. (Training resources: CEHN Pediatric Training Manual, PEHSU) <ul style="list-style-type: none"> <li>• <b>Online health care provider training module in development, developed materials and hosted bi-monthly calls with LHDs on nurse case management (NCM) and Medicaid reimbursement.</b></li> </ul>	
	Host trainings directed at public health professionals, clinical providers and other prevention partners about childhood lead prevention, policies and interventions <sup>1</sup>	

	<ul style="list-style-type: none"> <li>Collaborated with local partners on pregnant women conference in Detroit, in-person trainings as requested by health care offices, currently doing an assessment to determine training needs of LHDs throughout Michigan</li> </ul>	
	<p>Establish Medicaid lead poisoning prevention pilot projects<sup>2</sup></p> <ul style="list-style-type: none"> <li>43 out of 45 LHDs participating in the Medicaid EBL NCM project</li> </ul>	
	<p>Educate parents about lead prevention and exposure at first well child visits and OB/gyn visits before pregnancy and at prenatal visits</p> <ul style="list-style-type: none"> <li>Several Lead Commission grantees focused on education and screening of pregnant women.</li> </ul>	
	<p>Explore local payment processes for care coordination. Care coordinators would review charts for lead testing results, follow-up for children with high levels, monitor treatment, coordinate with school and other community support/services</p> <ul style="list-style-type: none"> <li>Encourage LHDs to coordinate with Medicaid Health Plans (MHPs) and providers.</li> </ul>	
<b>Identification and Exposure</b>	<p>Require Managed Care Organizations to track and report their performance on the HEDIS lead screening measure, providing incentive payments only for improvement or meeting a specific HEDIS score threshold</p> <ul style="list-style-type: none"> <li>Childhood Lead Poisoning Prevention Program (CLPPP) supplies state Medicaid with the blood lead data to report on MHP's Healthcare Effectiveness Data and Information Set (HEDIS) measures</li> </ul>	
	<p>Create a performance measure for blood lead testing of Medicaid-enrolled children and make publicly available its estimate of Medicaid-enrolled children tested for lead by age 2<sup>3</sup></p> <ul style="list-style-type: none"> <li>Medicaid data is available via CLPPP's annual report, also a metric for CDC grant</li> </ul>	
	<p>Create provider report cards on blood lead testing rates</p> <ul style="list-style-type: none"> <li>In process – current focus is local health department reports on lead testing within their jurisdiction, encouraging LHDs to work with providers to increase testing rates</li> </ul>	
	<p>Encourage OBGYNs to take an environmental history during a prenatal care visit<sup>4</sup></p> <ul style="list-style-type: none"> <li>Lead Commission Grantee out of Detroit developed a screening questionnaire for providers to ask questions about environmental exposures to determine if lead testing is needed, hope to expand statewide</li> </ul>	
	<p>Leverage partnerships with Women, Infant and Children (WIC) clinics, local health clinics, Federally Qualified Health Centers, and school-based health centers provide blood lead screening tests within the scope of their services. Encourage these providers to administer blood lead screening tests while Medicaid and CHIP children are visiting these clinics for other services.<sup>2</sup></p> <ul style="list-style-type: none"> <li>Purchased 45 leadcare2 machines for WIC clinics throughout the state.</li> </ul>	
	<p>Provide universal testing guidelines for providers</p>	
	<p>Provide standard screening questions from CDC, PEHSU and AAP Bright Futures to providers</p> <ul style="list-style-type: none"> <li>Blood Lead Test Quick Reference for Providers document outlines the risk assessment questions and best practices for follow up. This document is included in our Lead-Free Michigan toolkit, and available for download via <a href="http://Michigan.gov/lead">Michigan.gov/lead</a></li> </ul>	
	<p>Collect census tract level data on BLL results in collaboration with community-based organizations, local health agencies, CDC<sup>3</sup></p>	

	<ul style="list-style-type: none"> <li>We automatically geo-code all addresses that pass validation, provide on a weekly basis the geo-coded results to the LHDs for targeted outreach</li> </ul>	
	<p>Leverage CHIP's Health Services Initiatives (HSI) provision to fund lead exposure testing (Missouri)<sup>5</sup></p> <ul style="list-style-type: none"> <li>Michigan has a CHIP State Plan Amendment (SPA) for environmental investigations and abatement.</li> </ul>	
	<p>Use HEDIS or other performance information to compare plan level performance and consider requiring managed care plans to implement performance improvement projects (PIPs) focusing on blood lead screenings<sup>4</sup></p> <ul style="list-style-type: none"> <li>Data provided to state Medicaid</li> </ul>	
	<p>Require laboratories to electronically submit all blood lead test results to local and state health departments within a week of the result so the information can be aggregated to assist with prevention and response efforts<sup>3</sup></p> <ul style="list-style-type: none"> <li>State Reporting Rules require labs to report to CLPPP within 5 business days electronically.</li> </ul>	
	<p>Offer blood lead testing through mobile health units at clinics to improve access for at-risk populations (using portable devices to check BLL at point of care)<sup>3</sup></p> <ul style="list-style-type: none"> <li>Childhood Lead Exposure Elimination Commission (CLEEC) grantee starting a project to do in-home blood lead testing with leadcare2 machine.</li> </ul>	
	<p>Share "LEAD Exposure, 3 Facts" with pregnant woman at first appointment<sup>6</sup></p> <ul style="list-style-type: none"> <li>Pregnant and Nursing Mothers document created and included in the Lead-Free Michigan toolkit and available online. Sent to LHD and CLEEC grantees working with pregnant women.</li> </ul>	
<b>Treatment and Mitigation</b>	<p>Use CHIP money for remediation for kids with EBLL</p> <ul style="list-style-type: none"> <li>Michigan has a CHIP SPA for environmental investigations and abatement.</li> </ul>	
	<p>Support cultural awareness among physicians when surveillance data indicate children are being exposed to lead from candy, health remedies, or cosmetics<sup>3</sup></p> <ul style="list-style-type: none"> <li>Statewide Health Alert Network used when unique lead exposures are identified to notify health care providers and LHDs.</li> </ul>	
	<p>Distribute guidance documents for follow-up care for children who are identified with EBLL</p> <ul style="list-style-type: none"> <li>Blood Lead Test Quick Reference for Providers document outlines the risk assessment questions and best practices for follow up. This document is included in our Lead-Free Michigan toolkit, and available for download via <a href="http://Michigan.gov/lead">Michigan.gov/lead</a></li> </ul>	
	<p>Provide education for parents and providers around emotional toll of lead poisoning</p> <ul style="list-style-type: none"> <li>Michigan Family Center for Children and Youth with Special Health Care Needs is a resource available for support.</li> </ul>	
<b>Policy</b>	<p>Adopt the CDC reference level for lead poisoning prevention actions<sup>2</sup></p>	

<b>Primary Driver 2: Housing</b>		
<b>Recommendations:</b>		
<ul style="list-style-type: none"> <li>• Fund/support LHDs to serve as the “quarterback” for home visits with children with EBLLs - they can make the connection to provider, Medicaid health plans, and services like home investigations/abatement</li> <li>• Use CHIP money for environmental investigations and abatement - get creative about distribution of funds - Michigan has local grantees that are establishing their own programs</li> <li>• If there’s money, you need contractors to do the work</li> </ul>		
<b>Secondary Driver</b>	<b>Change Idea</b>	<b>Rank Change Idea from 1-5</b> 1 = low leverage 5 = high leverage
Identification and Exposure	Partner with MIECHV, CDC’s Healthy Homes and local health departments to provide home visits to children and pregnant women who have EBLLs and assist their families with referrals to housing, health and other resources <sup>9, 10</sup>	

<b>Primary Driver 4: Community</b>		
<b>Recommendations:</b>		
<ul style="list-style-type: none"> <li>• Provide LHD support/funding to do educational outreach - they are more familiar with community-level needs</li> <li>• Establish a stakeholder group with state/local policy makers to guide/inform CLPPP decision-making - they are helpful in establishing priorities/recommendations</li> </ul>		
<b>Secondary Driver</b>	<b>Change Idea</b>	<b>Rank Change Idea from 1-5</b> 1 = low leverage 5 = high leverage
<b>Prevention and Remediation</b>	Provide educational outreach concerning lead poisoning risks and interventions in targeted high-risk areas <sup>1</sup> <ul style="list-style-type: none"> <li>• Provide grant funding to local health department jurisdictions to do lead education/outreach/prevention in the cities with the highest EBLL rates. Working to identify additional high-risk areas using CLPPP data.</li> </ul>	
	Offer training opportunities for the community on policy content and procedures for ease of implementation <ul style="list-style-type: none"> <li>• Hosted six regional public forums to get input on the Lead Commission’s recommendations to prevent lead exposure in Michigan.</li> </ul>	
<b>Policy</b>	Promote feedback loops with common, shared vision between state and local policy makers to shape norms and intolerance for lead exposure <ul style="list-style-type: none"> <li>• Michigan Lead Commission and other stakeholder groups consist of state and local policy makers to inform and guide CLPPP on decision-making.</li> </ul>	

## Primary Driver 5: Products & Industry

### Recommendations:

- Develop educational materials on take-home lead - works well for situations with industry exposure

Secondary Drivers	Change Idea	Rank Change Idea from 1-5 1 = low leverage 5 = high leverage
Prevention and Remediation	Identify and educate parents who are exposed to lead at work about the dangers of take-home lead exposure <sup>8</sup> <ul style="list-style-type: none"> <li>• <a href="#">Take-home lead brochure included in the Lead-Free Michigan toolkit and online at Michigan.gov/lead</a></li> </ul>	