

2023 Quality Measure Highlight

Lead Screening in Children (LSC) and Developmental Screening (DEV) in Children

Alameda Alliance for Health (Alliance) values our dedicated provider partner community, and we are here for you. We are sharing the 2023 Quality Measure Highlight: Lead Screening in Children (LSC) and Developmental Screening (DEV) in Children to provide a snapshot of the Healthcare Effectiveness Data and Information Set® (HEDIS®), the Medicaid Child Core Set technical specifications, and suggested resources to help meet the measures.

For more information, please contact the Alliance Quality Improvement (QI) Department at deptQIteam@alamedaalliance.org.

Lead Screening in Children

Measure Description: The percentage of children two (2) years of age who had one (1) or more capillary or venous lead blood tests for lead poisoning on or before their 2nd birthday.

Exclusions: Members who were in hospice or died at any time during the measurement year.

Best Practices

- At each periodic health assessment through age six (6), provide oral or written anticipatory guidance to parents/guardians that children can be harmed by exposure to lead and are particularly at risk from the time the child begins to crawl until six (6) years of age.
- Order or perform blood lead screening tests on:
 - 1) All children at 12 and 24 months of age;
 - 2) When becoming aware that a child has no documented evidence of a test being taken by age six (6); or
 - 3) There has been a change in circumstances that puts the child at risk.
- Include blood lead screening in standardized workflows and standing orders.
- Utilize point-of-care testing, which is billed under CPT code 83655.
- Ensure staff are educated on the risks of lead exposure and screening recommendations to support patient education and awareness of the importance of screening.

References

California Department of Public Health Patient Lead Education Materials: www.cdph.ca.gov/Programs/CCDPHP/DEODC/CLPPB/Pages/edmatls.aspx

Electronic Blood Lead Reporting (EBLR) System: Per California Health and Safety Code, Section 124130, providers and labs who perform a blood lead analysis are required to submit blood lead testing results to the EBLR system. Test results entered into the EBLR count toward the numerator for this measure. Information on requirements, logging in, enrolling, training, announcements, frequently asked questions, and contacts can be found on the CDPH Childhood Lead Poisoning Prevention Branch website: www.cdph.ca.gov/Programs/CCDPHP/DEODC/CLPPB/Pages/report_results.aspx#.

CHDP Health Assessment Guidelines: Chapter 6: Blood Lead Test and Anticipatory Guidance: www.dhcs.ca.gov/services/chdp/Documents/2023-Blood-Lead-Testing-and-Anticipatory-Guidance.pdf

Developmental Screening in the First Three (3) Years of Life (DEV)

Measure Description: The percentage of children screened for risk of developmental, behavioral, and social delays using a standardized screening tool in the 12 months preceding or on their 1st, 2nd, or 3rd birthday.

Exclusions: None.

Screening Tools: Several tools can be used to meet the criteria for the measure, which include requirements around standardization, reliability, validity, sensitivity, and specificity. The following are examples of tools that meet the criteria and are included in the Bright Futures Recommendations for Preventive Care:

- Ages and Stages Questionnaire 3rd Edition (ASQ-3)
- Parents' Evaluation of Developmental Status (PEDS) Birth to age eight (8)
- Parents' Evaluation of Developmental Status Developmental Milestones (PEDS-DM)
- Survey of Well-Being in Children (SWYC)
- Battelle Developmental Inventory Screening Tool (BDI-ST) Birth to 95 months
- Bayley Infant Neuro-developmental Screen (BINS) Three (3) months to age two (2)
- Brigance Screens-II Birth to 90 months
- Child Development Inventory (CDI) 18 months to age six (6)
- Infant Development Inventory Birth to 18 months

Note: Standardized tools specifically focused on one domain of development do not meet the criteria. The recommendation behind this measure is related to global developmental screening tools.

Best Practices

- Document the screening with CPT code 96110.
- Include developmental screening in standardized workflows.
- Train all providers and staff who interact with young children in the administration of screening tools.
- Choose a screening tool that can be integrated as a questionnaire into your electronic health record.

References

American Academy of Pediatrics Screening Technical Assistance and Resource (STAR) Center: Screening Office Systems for Practice Transformation:

www.aap.org/en/patient-care/screening-technical-assistance-and-resource-center/screening-office-systems-for-practice-transformation/

Bright Futures Recommendations for Preventive Pediatric Health Care:

https://downloads.aap.org/AAP/PDF/periodicity_schedule.pdf