

SF162 - 0 - Elevated Blood Lead Level Reduced

Chief Author: **Kelly Morrison**  
 Committee: **Health And Human Services**  
 Date Completed: **2/2/2023 12:44:07 PM**  
 Agency: **Health Dept**

State Fiscal Impact	Yes	No
Expenditures	X	
Fee/Departmental Earnings		X
Tax Revenue		X
Information Technology	X	
Local Fiscal Impact		
	X	

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative. Reductions shown in the parentheses.

State Cost (Savings)	Biennium			Biennium	
	FY2023	FY2024	FY2025	FY2026	FY2027
Dollars in Thousands					
<b>General Fund</b>	-	233	61	61	61
<b>Total</b>	-	<b>233</b>	<b>61</b>	<b>61</b>	<b>61</b>
<b>Biennial Total</b>			<b>294</b>		<b>122</b>

Full Time Equivalent Positions (FTE)	Biennium			Biennium	
	FY2023	FY2024	FY2025	FY2026	FY2027
General Fund	-	.6	.5	.5	.5
<b>Total</b>	-	<b>.6</b>	<b>.5</b>	<b>.5</b>	<b>.5</b>

**LBO Analyst's Comment**

I have reviewed this fiscal note for reasonableness of content and consistency with the LBO's Uniform Standards and Procedures.

**LBO Signature:** Kate Schiller      **Date:** 2/2/2023 12:44:07 PM  
**Phone:** 651-296-6052      **Email:** kate.schiller@lbo.mn.gov

**State Cost (Savings) Calculation Details**

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative. Reductions are shown in parentheses.

\*Transfers In/Out and Absorbed Costs are only displayed when reported.

<b>State Cost (Savings) = 1-2</b>		<b>Biennium</b>			<b>Biennium</b>	
<b>Dollars in Thousands</b>	<b>FY2023</b>	<b>FY2024</b>	<b>FY2025</b>	<b>FY2026</b>	<b>FY2027</b>	
General Fund	-	233	61	61	61	61
<b>Total</b>	<b>-</b>	<b>233</b>	<b>61</b>	<b>61</b>	<b>61</b>	<b>61</b>
	<b>Biennial Total</b>		<b>294</b>			<b>122</b>
<b>1 - Expenditures, Absorbed Costs*, Transfers Out*</b>						
General Fund	-	233	61	61	61	61
<b>Total</b>	<b>-</b>	<b>233</b>	<b>61</b>	<b>61</b>	<b>61</b>	<b>61</b>
	<b>Biennial Total</b>		<b>294</b>			<b>122</b>
<b>2 - Revenues, Transfers In*</b>						
General Fund	-	-	-	-	-	-
<b>Total</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
	<b>Biennial Total</b>		<b>-</b>			<b>-</b>

**Bill Description**

The bill modifies Minnesota Statute, section 144.9501, subdivision 9, to redefine an elevated blood lead level (EBLL) as a blood lead test with a result that is equal to or greater than 3.5 micrograms of lead per deciliter (mcg/dL) of whole blood in any person, unless the commissioner finds that a lower concentration is necessary to protect public health.

**Assumptions**

The bill does not have an effective date. We assume that effort to update systems and materials for the reference value would begin in fiscal year 2024.

*Reduced Elevated Blood Lead Level*

An executive action in Minnesota in 2014 reduced the state’s EBLL level of concern from 10 to 5 micrograms of lead per deciliter, but the change was not codified in Minnesota Statutes.

Based on MDH blood lead surveillance data from 2019 to 2022, we estimate that an additional 1,244 confirmed and unconfirmed EBLL cases would need local and state public health response per year. The majority of the follow-up response work will be done by local public health (LPH), with de minimus technical assistance provided to LPH by the department. The department will require 0.1 full-time equivalent staff in fiscal year 2024 to prepare and ship new educational materials.

The department assumes there will be one-time costs to reprint and translate educational materials for use by state and local public health staff to reflect the new EBLL value, at \$30,000 in fiscal year 2024. Data systems tied to labs and reporting systems are in place and will require updates and additional IT staff resources to incorporate the new blood lead level into workflows, at \$102,000 in fiscal year 2024. An ongoing 0.5 FTE staff is required to process the additional elevated blood lead levels through the database, complete data quality reviews, and share the information with local public health. We assume that data analysis, health surveillance, external technical assistance, and reporting for a lower value will not result in an appreciable increase in effort for the department. Local public health has traditionally required very little technical assistance and data reporting is automated, therefore we assume the same minimal level of technical assistance. We assume that adding these additional cases to already existing data analysis and report writing is a negligible effort for the department.

*In-Home Risk Assessments*

We assume that our lead risks assessment responsibilities outlined in Minnesota Statutes, section 144.9504, subdivision

2(c) will not change under the bill.

**Expenditure and/or Revenue Formula**

<b>Expenditure (Actual Dollars)</b>	<b>Amount</b>	<b>FY 2024</b>	<b>FY 2025</b>	<b>FY 2026</b>	<b>FY 2027</b>
<b>Salary &amp; Fringe:</b>		FTE	FTE	FTE	FTE
Management Analyst 1	101,848	0.50	0.50	0.50	0.50
Health Educator 2	107,318	0.10			
	<b>FTE</b>	<b>0.60</b>	<b>0.50</b>	<b>0.50</b>	<b>0.50</b>
	<b>Subtotal</b>	<b>61,656</b>	<b>50,924</b>	<b>50,924</b>	<b>50,924</b>
<b>Information Technology:</b>					
Data System Programming		102,000			
	<b>Subtotal</b>	<b>102,000</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Other Operating Costs:</b>					
Printing, Communication, and translation costs		30,000			
	<b>Subtotal</b>	<b>30,000</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Grants, Aids &amp; Subsidies:</b>					
	<b>Subtotal</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Indirect (20.3% Eligible Costs)</b>	<b>Subtotal</b>	<b>39,312</b>	<b>10,338</b>	<b>10,338</b>	<b>10,338</b>
<b>Expenditure</b>	<b>Total</b>	<b>232,968</b>	<b>61,262</b>	<b>61,262</b>	<b>61,262</b>
<b>Fiscal Tracking (Dollars in Thousands)</b>		<b>FY 2024</b>	<b>FY 2025</b>	<b>FY 2026</b>	<b>FY 2027</b>
<b>Health Protection BACT 03</b>		<b>233</b>	<b>61</b>	<b>61</b>	<b>61</b>
Administration		233	61	61	61
Grants		0	0	0	0

**Long-Term Fiscal Considerations**

**Local Fiscal Impact**

Local public health departments may incur costs in response to an additional 1,244 identified Elevated Blood Lead Levels (EBLL) cases per year that would meet the new definition. Local public health typically provides initial services such as follow-up testing, education, and interventions related to case management and support for families with an EBLL case.

**References/Sources**

**Agency Contact:**

**Agency Fiscal Note Coordinator Signature:** Char Kimber

**Date:** 2/2/2023 12:37:32 PM

**Phone:** 651-201-4685

**Email:** health.fiscalnotes@state.mn.us