North Carolina—Impact Statement

Each year, approximately 150 children are newly diagnosed with lead poisoning in North Carolina. Scientific research indicates the need to start helping even more children with blood lead levels below the current action level. North Carolina's Childhood Lead Poisoning Prevention Program (CLPPP) and county health department officials follow up on these cases, inspect the homes, and order repairs to units with lead hazards. The CLPPP issues and completes 50 abatement or lead hazard control orders annually, and follows or manages 300 cases. Medicaid's reimbursement rate has not increased since 1999, so it does not fully cover the costs associated with environmental investigations and case management.

North Carolina's CLPPP maintains a surveillance system to capture and aggregate the results of blood tests for lead. Using this system, it has accumulated over two million blood test records since 1992. The surveillance data enables the CLPPP to identify high-risk areas for lead poisoning and track patterns over time.

CDC funding enables this program to respond to emerging lead threats. For example, in some cases, multiple children in the same family may have elevated blood lead levels. The CDC-funded environmental health professional conducts an environmental inspection to identify a lead hazard in the home or child care facility.

North Carolina's CLPPP received approximately $441,000 in FY10, which paid for two full-time staff positions for grantees and 7.5 sub-grantee jobs. North Carolina was also able to support eight subcontracts with a cumulative value of $300,000 using these funds. The FY11 funding level is $594,000, allowing for a slightly expanded program; but the program could be in jeopardy if the Senate version of the appropriations bill is adopted as law. If the program is eliminated or severely cut back in FY12, it will result in job loss and a reduction in vital services. Without the surveillance data, there will be no way to treat the existing threat or track a possible resurgence in blood lead levels.