

# Select Health Quality Provider Program

## SCREENING: CHILDHOOD LEAD

### 2026 Quality Measure Reference Guide



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#### Related Quick Links

- [Primary Care Measures Quick Guide](#)
- [Report Hub Instructions: Basic User](#)
- [Formatting a Gaps List in Excel](#)
- [Demographic Allowable Corrections](#)
- [Quality Data Correction \(QDC\) Tool: Submitting Corrections](#)



*This measure is included in the Primary Care Quality Provider Program.*

## Measure Description

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### Screening: Childhood Lead

#### (Medicaid/Children's Health Insurance Program [CHIP] Only)

<b>Description</b>	The percentage of Select Health Community Care (Medicaid/CHIP) members who had at least 1 capillary or venous lead blood test for lead poisoning by their 2nd birthday
<b>Denominator</b>	Children who turn 2 years of age during the measurement year
<b>Numerator</b>	Children who had at least 1 lead capillary or venous blood test on or before their 2nd birthday
<b>Intake and Measurement Periods</b>	<b>January 1</b> through <b>December 31</b> of the measurement year
<b>Corrections Allowed</b>	"Patient had lead screening."

# Allowable Corrections

## General Guidance

- Include a copy of EHR note, progress note, or screen print signed by MA/RN/MD including member name, DOB, and provider.
- Submit corrections using [this online tool](#).
- Wait 6 weeks from the date of service to enter corrections to allow for claim lag.
- Don't attach multiple patient records to a single correction.
- Each date of service requires separate correction entries.

LEAD SCREENING IN CHILDREN ALLOWABLE CORRECTIONS						
Allowable Correction	Submission Correction Process				Additional Required Documentation (see "General Guidance" for Standard Requirements)	Notes for Entering Corrections
	Category	Measure	Component	Correction Type(s)		
Unaccounted for screening: Childhood Lead	Preventive Screening	Lead Screening in Children	LSC Numerator	Assay of Lead	Uploaded documentation of the test date and test result.	Indicate the name of the specific antigen and the date of service.

[Access guidance for general corrections to demographics.](#)

## Frequently Asked Questions

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### Q: Why does this measure matter?

**A:** Exposure to lead can cause damage to the brain and other vital organs, as well as intellectual and behavioral deficits. Because children who are exposed to lead often have no obvious symptoms, lead poisoning often goes unrecognized.

Screening for lead is an easy way to detect an abnormal blood lead level in children. There is no safe blood lead level. If not found early, exposure to lead and high blood lead levels can lead to irrevocable effects on a child's physical and mental health.<sup>1</sup>

### Q: What is Select Health doing to help?

**A:** Select Health promotes lead screening by:

- Covering lead testing for all children on Medicaid and CHIP
- Making interactive voice response calls to Medicaid members with a gap
- Maintaining a [preventive care page](#) for toddlers, teens, and young adults that highlights childhood lead screening (see "Recommended Immunizations" [By Age]).

### Q: What are best practices for this measure?

**A:** Best practices include:

- Developing a screening policy and educating clinic staff
- Following Centers for Disease Control (CDC) recommendation that children enrolled in Medicaid get tested for lead at ages 12 and 24 months<sup>2</sup>
- Adding lead testing to pre-visit planning and/or electronic health record (EHR) alerts
- Using the Select Health Gaps-in-Care list to identify patients who need to be tested
- Tracking progress with the Select Health Clinical Summary and allowing providers to monitor their performance rates

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### References:

1. National Council for Quality Assurance (NCQA). *Lead Screening in Children (LSC)*. ncqa.org website. 2024 <https://www.ncqa.org/report-cards/health-plans/state-of-health-care-quality-report/lead-screening-in-children-lsc-e/>. Accessed January 20, 2026.
2. Centers for Disease Control and Prevention (CDC); Childhood Lead Poisoning Prevention. *Testing Children for Lead Poisoning*. CDC.gov website. [https://www.cdc.gov/lead-prevention/testing/?CDC\\_AAref\\_Val=https://www.cdc.gov/nceh/lead/prevention/testing-children-for-lead-poisoning.htm](https://www.cdc.gov/lead-prevention/testing/?CDC_AAref_Val=https://www.cdc.gov/nceh/lead/prevention/testing-children-for-lead-poisoning.htm). Accessed January 20, 2026.

## Working Your Open Gaps List

STEP 1
<p>Create a current gaps-in-care list:</p> <ol style="list-style-type: none"> <li>1. Open your Gaps-in-Care-for-Download report: <a href="#">QPP Report Hub</a></li> <li>2. Apply these filters:                             <ul style="list-style-type: none"> <li>— <b>Super clinic:</b> Choose your clinic.</li> <li>— <b>Measure:</b> Click on “Lead Screening in Children (LSC),”</li> <li>— <b>Status:</b> Uncheck the "Compliant" box. This will filter for only the achievable and/or non-compliant members.</li> </ul> </li> <li>3. In the drop-down menu on the top right side of the page, change the view from "<b>Member</b>" to "<b>Download.</b>"</li> <li>4. Follow the instructions on the screen to export the data to Excel.</li> </ol> <p>Refer to <a href="#">Report Hub Instructions: Basic User</a>.</p>
STEP 2
<p>Format your Excel export. (Refer to <a href="#">Formatting a Gaps List in Excel</a>.)</p>
STEP 3
<p>Review tips for working your gaps-in-care list (<a href="#">page 6</a>).</p>

## Measure Information

All children enrolled in Medicaid/CHIP are required to receive a blood lead screening test at ages 12 months and 24 months. This measure reports the percentage of children (Medicaid and CHIP only) 2 years of age who had 1 or more capillary or venous lead blood tests by their second birthday.

**NOTE:** Examples used in this document are for instructional purposes only; the dates that appear are only representative of what a user might see.

### For this measure:

- The measurement period is between birth and age 2 years.
- Any testing completed after the child’s 2nd birthday will NOT count as compliance for this measure.
- Your Gaps-in-Care list notes the measurement end date in the “Measure Instructions” column. Any tests completed after the measurement end date will **NOT** count as compliant for this measure.

Measure	Qualified D	Compliance	Status	Status Detail	Achievable D	Measure Instructions
Lead Screening in Children (LSC) (LSC)			Non-Compliant	To Be Completed		by 5/17/2024.
Lead Screening in Children (LSC) (LSC)		1/10/2024	Compliant	83855 Lead Tests		
Lead Screening in Children (LSC) (LSC)			Achievable	To Be Completed	10/30/2024	by 10/30/2024.

### Corrections Pro Tip

Please wait 6 weeks from the date of service before determining if a correction is needed. This allows time for claims to be processed, ultimately ensuring that only needed corrections are submitted.

# Working Open Gaps List, Continued

## Tips for Working your Gaps-in-Care List

**Learn More.** Refer to the [Quality Data Correction \(QDC\) Tool: Submitting Corrections.](#)

### 1. Sort the list alphabetically using the “Status Detail” column.

For the “achievable” patient, the “Status Detail” column will indicate that the test has not been completed.

Measure	Compliance Date	Status	Numerator Value	Status Detail
Lead Screening in Children (LSC)	9/24/YYYY	Compliant		83655 Lead Tests SRC:P
Lead Screening in Children (LSC)		Missed		To Be Completed
Lead Screening in Children (LSC)		Achievable		To Be Completed

When the status is listed as compliant, a correction is **NOT** needed.

The date of the lead test for which Select Health has a record will appear in the “Compliance Date” column.

Status	Numerator Value	Status Detail	Achievable Date	Measure Instructions
Compliant		83655 Lead Tests SRC:P		Member completed lead poisoning screening.
Missed		To Be Completed		Member did not complete lead poisoning screening by 11/19/YYYY
Achievable		To Be Completed	46003	Member needs lead poisoning screening by 12/12/YYYY

### 2. Submit a record of the completed screening if the lead screening is current but the gap is still showing as “Achievable” or “Non-compliant” by:

- Accessing the Quality Data Corrections (QDC) Tool. (Refer to the section on [Submitting Corrections.](#))
- Use the link(s) provided in the downloaded gaps-in-care Excel file to have member and measure information pre-populated.

QDC Corrections URL

<https://fssocaregiver.intermountain.net/MCS/QualityDataCorrection/submission?&cat=1&msr=12&comp=16>

Quality Data Correction Tool > Add Correction

EMR: \_\_\_\_\_ Or Member Id: \_\_\_\_\_

Provider Name: Coleman, Stephen

Category: Preventive Screening - Measure: Lead Screening in Children - Component: LSC Numerator

Measure Specific Correction

LSC Numerator Date:  LSC Numerator Type: Assay of Lead

## References:

1. Utah Lead Coalition. Healthcare. [Leadcoalition.ut.gov](https://leadcoalition.utah.gov/resources/healthcare-resources) website. 2025 (last updated February 25, 2025). Accessed January 20, 2026.
2. Centers for Disease Control and Prevention. About childhood lead poisoning prevention. [CDC.gov](https://www.cdc.gov/lead-prevention/about/index.html) website. March 13, 2025. Accessed January 20, 2026.

## Best Practices: Closing Gaps in Care

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### Lead Screening in Children (LSC)

This measure requires **1 capillary or venous lead blood test** for lead poisoning by the 2nd birthday. This is **only** for children on Medicaid and CHIP.

#### To help close gaps in care:

- Remember to bill for POC in-office tests (code **83655**).
- Submit the date and result through our corrections process to receive credit as members may have been covered by another insurer or provider when the lead test was completed.
- Make sure blood lead testing is built into your provider order sets for the 12- and 24-month visits.
- Designate staff to scrub charts prior to the visit and send notes/messages to the medical assistant/provider about whether the patient is due for a blood lead test.

Questions about the Quality Provider Program?  
Contact us at [QualityProvider@selecthealth.org](mailto:QualityProvider@selecthealth.org).