
From: Lasher, GERALYN (DCH)
Sent: Thursday, September 24, 2015 2:10 PM
To: Peeler, Nancy (DHHS); Minicuci, Angela (DHHS)
Cc: Scott, Robert L. (DHHS); Bien, Stan (DHHS); Eisner, Jennifer (DHHS)
Subject: RE: Flint Talking Points

I would leave it out for now

From: Peeler, Nancy (DCH)
Sent: Thursday, September 24, 2015 1:59 PM
To: Minicuci, Angela (DCH)
Cc: Scott, Robert L. (DCH) ; Bien, Stan (DCH) ; Eisner, Jennifer (DCH) ; Lasher, GERALYN (DCH)
Subject: Re: Flint Talking Points

Either way is fine with me.

Sent from my iPad

On Sep 24, 2015, at 1:57 PM, Minicuci, Angela (DCH) <MinicuciA@michigan.gov> wrote:

I personally think that's more inside baseball but if G or Jen thinks it would help to say, I'm fine adding it in.

Angela

From: Peeler, Nancy (DCH)
Sent: Thursday, September 24, 2015 1:54 PM
To: Minicuci, Angela (DCH) <MinicuciA@michigan.gov>
Cc: Scott, Robert L. (DCH) <ScottR9@michigan.gov>; Bien, Stan (DCH) <biens@michigan.gov>; Eisner, Jennifer (DCH) <EisnerJ@michigan.gov>; Lasher, GERALYN (DCH) <lasherz@michigan.gov>
Subject: Re: Flint Talking Points

Do we want to add, in the first section, that MDHHS is working with Hurley to obtain approval for sharing a broader data set with Hurley for their review.

Sent from my iPad

On Sep 24, 2015, at 1:46 PM, Minicuci, Angela (DCH) <MinicuciA@michigan.gov> wrote:

Excellent. Thank you, Bob. I also spoke with Stan. The updated talking points are attached.

Angela

From: Scott, Robert L. (DCH)
Sent: Thursday, September 24, 2015 1:35 PM
To: Minicuci, Angela (DCH) <MinicuciA@michigan.gov>; Peeler, Nancy (DCH)

<PeelerN@michigan.gov>; Bien, Stan (DCH) <biens@michigan.gov>
Cc: Eisner, Jennifer (DCH) <EisnerJ@michigan.gov>; Lasher, GERALYN (DCH)
 <lasherG@michigan.gov>
Subject: RE: Flint Talking Points

Angela,

One suggested change to the second bullet:
 "The analysis that Hurley conducted is different from the way MDHHS has analyzed data regarding blood lead levels in Flint."

Another suggestion for the 5th bullet under Differences in Analysis:
 "The MDHHS analysis looks specifically at the first elevated blood lead level for each child, which provides an accurate picture of when first exposure occurred."

Thanks,
 Bob

From: Minicuci, Angela (DCH)
Sent: Thursday, September 24, 2015 1:16 PM
To: Peeler, Nancy (DCH) <PeelerN@michigan.gov>; Bien, Stan (DCH) <biens@michigan.gov>; Scott, Robert L. (DCH) <ScottR9@michigan.gov>
Cc: Eisner, Jennifer (DCH) <EisnerJ@michigan.gov>; Lasher, GERALYN (DCH) <lasherG@michigan.gov>
Subject: Flint Talking Points

Hi everyone,

With the Hurley press event at 3pm, can you please take a look at the following/attached talking points to make sure these are accurate and send me your edits?

Thank you.

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- The results of the Hurley Children's Hospital are under review by the Michigan Department of Health and Human Services.
 - The analysis that Hurley conducted is different than the way MDHHS collects data regarding blood lead levels.
 - MDHHS is looking to see if we can replicate the results of the Hurley study to see how they achieved their results.

Differences in Analysis

- MDHHS data provides a much more robust picture of the entire blood lead levels for the Flint area, and specifically, accounts for data over the full course of the past five years.
- Looking at the past five years as a whole provides a much more accurate look at the seasonal trends of lead in the area.

- Seasonal exposure is higher in the summer for a variety of reasons including children playing outside in the soil, and when windows are open and lead paint is more likely to be in the air. This seasonal increase would be unrelated to the water system.
- Our data includes children from the entire city, including all medical facilities, rather than just Hurley, has a larger age group of children, and includes a much larger sample size.
- MDHHS data also looks specifically at the first test with elevated blood lead levels which provides a much more accurate picture of when and how first exposure occurred.
- The Hurley data includes a smaller sample size, much more limited time period (January-September of 2013 and 2015 only), and a smaller age group of children.

WIC Children

- For children with elevated blood lead levels that receive WIC benefits, they may be eligible to receive ready made formula with a test result that indicates that the child has an elevated blood lead level.
- WIC cannot cover bottled water.