From: Wells, Eden (DHHS)
Sent: Monday, December 21, 2015 9:50 AM
To: Dykema, Linda D. (DHHS)
Cc: Stanbury, Martha (DHHS);Miller, Corinne (DHHS)
Subject: Re: Pb in Flint-TIME SENSITIVE

Just talked with Corinne. Note that the email Matt sent was a heads-up, and he feels that the recommendations going to the Governor's office this week (today, tomorrow?) will make recommendations as he outlined- most of which Sue and Geralyn and I ave addressed with him and/or the GTF.

The main one he was concerned about is the issue of going to weekly reports. With Medicaid going to weekly, this will synergies well. The GTF is NOT interested in the EPID or going into the weeds of what our denominators are, or the intricacies of data collection. They just want consistent valid and reliable reporting, in my opinion.

I will be replyng to Matt this AM with a CC to Sue, Corinne and Geralyn on the fact that weekly will be the goal for the blood lead reporting.

E

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From: Dykema, Linda D. (DHHS)
Sent: Sunday, December 20, 2015 5:18 PM
To: Wells, Eden (DHHS)
Cc: Stanbury, Martha (DHHS); Miller, Corinne (DHHS)
Subject: Re: Pb in Flint-TIME SENSITIVE

I absolutely agree that we have to define the task with full knowledge of what's feasible. No more chasing our tails on these reports. It's unproductive.

Sent from my iPhone

On Dec 20, 2015, at 2:51 PM, Wells, Eden (DHHS) <WellsE3@michigan.gov> wrote:

> I agree- and also think he will go with whatever the EPIds feel is best for the denominator--

E

Sent from my iPhone

On Dec 20, 2015, at 2:28 PM, Stanbury, Martha (DHHS) <stanburym@michigan.gov> wrote:

> Reading this reinforces my thought that we need to sit down with Dr. Davis and perhaps others on the task force to discuss all the issues around numerators and denominators, so the task force understands what is reasonable to ask for - what makes sense. For example, our conclusion on Friday was that if Medicaid metrics are going to be used, then only Medicaid kids should be in the numerator. Dr. Davis would need to be made aware of that recommendation and the rationale for it. Sending emails back and forth may not be the best way to come up with a long term data dissemination plan that meets everyone's expectations, so I would hope there could be a conference call or, better yet, an in person discussion including our epidemiology and BL surveillance SMEs. Your thoughts?
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> **From:** Wells, Eden (DHHS)
> **Sent:** Sunday, December 20, 2015 10:37 AM
> **To:** Stanbury, Martha (DHHS)
> **Cc:** Dykema, Linda D. (DHHS)
> **Subject:** Fw: Pb in Flint-TIME SENSITIVE
>
> Martha- Looping you in--
>
> E
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> ---
>
> **From:** Wells, Eden (DHHS)
> **Sent:** Saturday, December 19, 2015 5:13 PM
> **To:** Miller, Corinne (DHHS); Dykema, Linda D. (DHHS)
> **Cc:** Lasher, Geralyn (DHHS); Moran, Susan (DHHS)
> **Subject:** Fw: Pb in Flint-TIME SENSITIVE
>
> Corinne, please review Matt's email below and my response---while increased frequency of reporting to weekly is possible, I am not sure of the current time frame for obtaining the Medicaid denominators and if making those weekly works. We can discuss by phone if necessary.
>
> ---
>
> **From:** Eden Wells <ewells@umich.edu>
> **Sent:** Saturday, December 19, 2015 4:54 PM