STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION DOA-2049 (R03/2012) DIVISION OF EXECUTIVE BUDGET AND FINANCE 101 EAST WILSON STREET, 10TH FLOOR P.O. BOX 7864 MADISON, WI 53707-7864 FAX: (608) 267-0372

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

Type of Estimate and Analysis Original □ Updated □ Corrected	
2. Administrative Rule Chapter, Title and Number DHS 115, Screening of Newborns for Congenital and Metal	polic Disorders
3. Subject Newborn screening for congenital and metabolic disorders (Organic Acidemias (OAs) as conditions for which newborn. 115.04, are coded using the <i>International Classification of I</i> Health and Human Services requires health care providers, I the <i>International Classification of Diseases</i> , 10 th Revision (consistency among health care providers and to facilitate the CM codes for the CCHD and OA conditions proposed, and	s must be tested. Currently, the conditions listed in s. DHS <i>Diseases</i> , 9 th <i>Revision</i> (ICD-9CM). The U.S. Department of health plans, and health care clearinghouses to transition to ICD-10 CM) effective October 1, 2015. To ensure e transition in this order, the proposed rule lists the ICD-10
4. Fund Sources Affected ☐ GPR ☐ FED ☐ PRO ☐ PRS ☐ SEG ☐ SEG-S	5. Chapter 20, Stats. Appropriations Affected
6. Fiscal Effect of Implementing the Rule X No Fiscal Effect ☐ Increase Existing Revenues ☐ Indeterminate ☐ Decrease Existing Revenues	☐ Increase Costs ☐ Could Absorb Within Agency's Budget ☐ Decrease Cost
☐ Local Government Units ☐ Pub	ecific Businesses/Sectors blic Utility Rate Payers all Businesses (if checked, complete Attachment A)
8. Would Implementation and Compliance Costs Be Greater Than Yes X No	\$20 million?
135 modified s. 253.13 (1) Stats., relating to infant blood test methods in addition to blood testing. Under the permanent of	ortly after birth and tested by the WSLH. 2013 Wisconsin Act sts so that the required screening may be performed by order, the department revises ch. DHS 115 to conform the ons for which newborns must be tested and the ICD-10 CM
CCHD is usually described as those congenital cardiac malf necessary within the first months of life, and is screened for Department of Health and Human Services' Discretionary A Children added CCHD to its Recommended Uniform Scree CCHD screening to their newborn screening panel.	by use of pulse oximetry. In September 2010, the federal Advisory Committee on Heritable Disorders in Newborns and
Adding OA as a condition for testing corrects an inadvertent disorders. OA is a group of inherited disorders that lead to a	

The department solicited public comments on the rule's economic impact December 2, 2014 to December 16, 2014. No

acids in the body for which the WSLH currently tests newborns. Though OA met the criteria under s. DHS 115.06 for being added to the list of congenital and metabolic disorders for which WSLH must test blood samples, the disorders

were not included in subsequent revisions of s. DHS 115.04.

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comments were received.

The department does not anticipate that the revisions to ch. DHS 115 will have a fiscal impact on the department or local government.

10. Summary of the businesses, business sectors, associations representing business, local governmental units, and individuals that may be affected by the proposed rule that were contacted for comments.

The proposed rule will not have an effect on small businesses, as defined under s. 227.114 (1), Stats.

- 11. Identify the local governmental units that participated in the development of this EIA.
- The proposed rule will not have an effect on small businesses, as defined under s. 227.114 (1), Stats.
- 12. Summary of Rule's Economic and Fiscal Impact on Specific Businesses, Business Sectors, Public Utility Rate Payers, Local Governmental Units and the State's Economy as a Whole (Include Implementation and Compliance Costs Expected to be Incurred)

The proposed rule will not have an effect on small businesses, as defined under s. 227.114(1), Stats.

13. Benefits of Implementing the Rule and Alternative(s) to Implementing the Rule

Section 253.13 (1), Stats., requires that every infant born in each hospital or maternity home, prior to its discharge, be tested for congenital and metabolic disorders, as specified in rules promulgated by the department. Therefore, there are no reasonable alternatives to the proposed rulemaking.

14. Long Range Implications of Implementing the Rule

Indeterminate.

15. Compare With Approaches Being Used by Federal Government

There appears to be no existing or proposed federal regulations that address the activities to be regulated by the proposed rules.

16. Compare With Approaches Being Used by Neighboring States (Illinois, Iowa, Michigan and Minnesota)
Illinois, Iowa, Michigan, and Minnesota state law require that newborns be screened for congenital and metabolic disorders, including CCHD and Organic Acidemias.

17. Contact Name	18. Contact Phone Number
Susan Uttech	(608) 267-3561

This document can be made available in alternate formats to individuals with disabilities upon request.

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ATTACHMENT A

 Summary of Rule's Economic and Fiscal Impact on Small Businesses (Separately for each Small Business Sector, Include Implementation and Compliance Costs Expected to be Incurred)
2. Summary of the data sources used to measure the Rule's impact on Small Businesses
3. Did the agency consider the following methods to reduce the impact of the Rule on Small Businesses?
☐ Less Stringent Compliance or Reporting Requirements
☐ Less Stringent Schedules or Deadlines for Compliance or Reporting
☐ Consolidation or Simplification of Reporting Requirements
☐ Establishment of performance standards in lieu of Design or Operational Standards
☐ Exemption of Small Businesses from some or all requirements
☐ Other, describe:
4. Describe the methods incorporated into the Rule that will reduce its impact on Small Businesses
5. Describe the Rule's Enforcement Provisions
0. Describe the Naic 3 Emorganical Townsons
6. Did the Agency prepare a Cost Benefit Analysis (if Yes, attach to form)
☐ Yes ☐ No