2009 DRAFTING REQUEST

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Received: 09/15/2009 Wanted: As time permits For: Kristen Dexter (608) 266-9172 This file may be shown to any legislator: NO				Received By: tdodge Identical to LRB: 1830/1 By/Representing: Ilsa Peterson Drafter: tdodge Addl. Drafters:											
								May Contact: Sen. Lassa							
								Subject: Health - miscellaneous					Extra Copies:		
								Submit	via email: YES						
Request	er's email:	Rep.Dexte	r@legis.wis					sconsin.gov							
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At Intro.

Received By: tdodge

2009 DRAFTING REQUEST

Bill

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May Contact: Sen. Lassa Addl. Drafters:

Subject: Health - miscellaneous Extra Copies:

Submit via email: YES

Requester's email: Rep.Dexter@legis.wisconsin.gov

Carbon copy (CC:) to:

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No specific pre topic given

Newborn hearing screening

Instructions:

See attached

Pre Topic:

Topic:

Drafting History:

Vers. Drafted Reviewed Typed Proofed Submitted Jacketed Required

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FE Sent For:



State of Misconsin 2009 - 2010 LEGISLATURE

In: 9/15/09

2009 BILL

LRB-1830/1
TJD:wlj:md

D-note 1

Companion changes

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AN ACT to amend 253.13 (2), 253.13 (3) and 253.13 (4); and to create 253.13 (1g)

of the statutes; relating to: requiring newborn hearing screening.

Analysis by the Legislative Reference Bureau

Under current law, the attending physician or nurse–midwife must ensure that every infant born undergoes a blood test for congenital disorders and metabolic disorders. Also under current law, hospitals must make newborn hearing screening available for all infants delivered at the hospital. The state laboratory of hygiene performs tests on the blood samples; provides necessary diagnostic services, treatment, and follow–up counseling; advises the physician of the test results; and reports positive test results to the Department of Health Services (DHS).

This bill requires the physician, nurse–midwife, or certified professional midwife who attended the birth to arrange for the infant to be tested before hospital discharge, or within 30 days of birth if the infant was not born in a hospital, to determine if the infant has hearing loss. The physician, nurse–midwife, or certified professional midwife who attended the birth must also advise the parents or legal guardian of the infant of the hearing test results. This bill also requires the state laboratory of hygiene to provide additional follow–up services and to report positive hearing screening results to DHS.

For further information see the *state and local* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

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SECTION 1.	253.13	(1g) of the statut	es is created to	read:
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- 253.13 (1g) HEARING SCREENING. (a) In this subsection:
- 1. "Hearing loss" has the meaning given in s. 253.115 (1) (a).
- 2. "Hospital" has the meaning given in s. 50.33 (2).
- (b) The physician, nurse-midwife licensed under s. 441.15, or certified professional midwife licensed under s. 440.982 who attended the birth shall arrange for the infant to be tested before hospital discharge, or within 30 days of birth if the infant was not born in a hospital, to determine if the infant has hearing loss.

Section 2. 253.13 (2) of the statutes, as affected by 2009 Wisconsin Act 28, is amended to read:

253.13 (2) Tests: Diagnostic. Dietary and follow-up counseling program: Fees. The department shall contract with the state laboratory of hygiene to perform the tests specified under this section subs. (1) and (1m) and to furnish materials for use in the tests. The department shall provide necessary diagnostic and follow-up services, special dietary treatment as prescribed by a physician for a patient with a congenital disorder as identified by tests under sub. (1), (1g), or (1m), and follow-up counseling for the patient and his or her family. The state laboratory of hygiene board, on behalf of the department, shall impose a fee for tests performed under this section the contract sufficient to pay for services provided under the contract. The state laboratory of hygiene board shall include as part of this fee amounts the department determines are sufficient to fund the provision of diagnostic and counseling services, special dietary treatment, and periodic evaluation of infant screening programs, the costs of consulting with experts under sub. (5), and the costs of administering the congenital disorder program under this section and shall credit these amounts to the appropriation accounts under s. 20.435 (1) (ja) and (jb).

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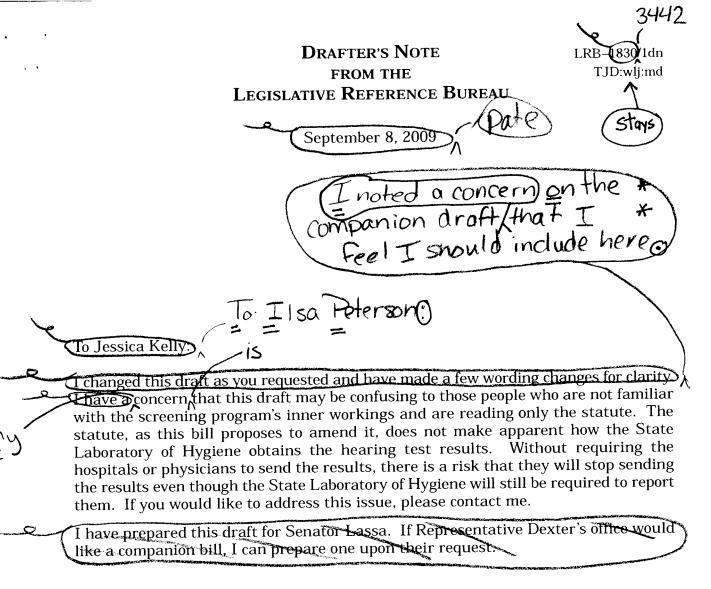
Section 3. 253.13 (3) of the statutes is amended to read:

253.13 **(3)** Exceptions. This section shall not apply if the parents or legal guardian of the child object thereto on the grounds that the test conflicts with their religious tenets and practices. No tests may be performed under sub. (1) or (1g). or (1m) unless the parents or legal guardian are fully informed of the purposes of testing under this section and have been given reasonable opportunity to object as authorized in this subsection or in sub. (1m) to such tests.

Section 4. 253.13 (4) of the statutes is amended to read:

253.13 **(4)** Confidentiality of tests and related information. The state laboratory of hygiene shall provide the test results for testing under subs. (1) and (1m) to the physician, who shall advise the parents or legal guardian of the results. The physician, nurse—midwife licensed under s. 441.15, or certified professional midwife licensed under s. 440.982 who arranged for testing under sub. (1g) shall advise the parents or legal guardian of the test results under sub. (1g). No information obtained under this section from the parents or guardian or from blood or urine specimens from the infant may be disclosed except for use in statistical data compiled by the department without reference to the identity of any individual and except as provided in s. 146.82 (2). The state laboratory of hygiene board shall provide to the department the names and addresses of parents of infants who have positive test results from tests performed under sub. (1), (1g), or (1m).

21 (END)



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E-mail: tamara.dodge@legis.wisconsin.gov

DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

LRB-3442/1dn TJD:wlj:ph

September 17, 2009

To Ilsa Peterson:

On the companion draft I noted a concern that I feel I should include here. My concern is that this draft may be confusing to those people who are not familiar with the screening program's inner workings and are reading only the statute. The statute, as this bill proposes to amend it, does not make apparent how the State Laboratory of Hygiene obtains the hearing test results. Without requiring the hospitals or physicians to send the results, there is a risk that they will stop sending the results even though the State Laboratory of Hygiene will still be required to report them. If you would like to address this issue, please contact me.

Tamara J. Dodge Legislative Attorney Phone: (608) 267-7380

E-mail: tamara.dodge@legis.wisconsin.gov

Parisi, Lori

From: Peterson, Ilsa

Sent: Monday, September 28, 2009 10:20 AM

To: LRB.Legal

Subject: Draft Review: LRB 09-3442/1 Topic: Newborn hearing screening

Please Jacket LRB 09-3442/1 for the ASSEMBLY.