



## 2009 SENATE BILL 323

September 30, 2009 – Introduced by Senators LASSA, TAYLOR, LEHMAN, SCHULTZ, KREITLOW, RISSER, MILLER, DARLING, COGGS and ERPENBACH, cosponsored by Representatives DEXTER, KAUFERT, BERCEAU, BLACK, TOWNSEND, SCHNEIDER, HILGENBERG, MASON, SOLETSKI, SINICKI, JORGENSEN, HIXSON, LOTHIAN, TURNER, GRIGSBY, A. WILLIAMS, KRUSICK, WOOD, A. OTT, MOLEPSKE JR. and BERNARD SCHABER. Referred to Committee on Health, Health Insurance, Privacy, Property Tax Relief, and Revenue.

- 1     **AN ACT** *to amend* 253.13 (2), 253.13 (3) and 253.13 (4); and *to create* 253.13 (1g)  
2     of the statutes; **relating to:** requiring newborn hearing screening.

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### ***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.

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

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1           **SECTION 1.** 253.13 (1g) of the statutes is created to read:

2           253.13 **(1g)** HEARING SCREENING. (a) In this subsection:

3           1. “Hearing loss” has the meaning given in s. 253.115 (1) (a).

4           2. “Hospital” has the meaning given in s. 50.33 (2).

5           (b) The physician, nurse–midwife licensed under s. 441.15, or certified  
6 professional midwife licensed under s. 440.982 who attended the birth shall arrange  
7 for the infant to be tested before hospital discharge, or within 30 days of birth if the  
8 infant was not born in a hospital, to determine if the infant has hearing loss.

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

11           253.13 **(2)** TESTS; DIAGNOSTIC, DIETARY AND FOLLOW-UP COUNSELING PROGRAM;  
12 FEES. The department shall contract with the state laboratory of hygiene to perform  
13 the tests specified under ~~this section~~ subs. (1) and (1m) and to furnish materials for  
14 use in the tests. The department shall provide necessary diagnostic and follow-up  
15 services, special dietary treatment as prescribed by a physician for a patient with a  
16 congenital disorder as identified by tests under sub. (1), (1g), or (1m), and follow-up  
17 counseling for the patient and his or her family. The state laboratory of hygiene  
18 board, on behalf of the department, shall impose a fee for tests performed under ~~this~~  
19 ~~section~~ the contract sufficient to pay for services provided under the contract. The  
20 state laboratory of hygiene board shall include as part of this fee amounts the  
21 department determines are sufficient to fund the provision of diagnostic and  
22 counseling services, special dietary treatment, and periodic evaluation of infant  
23 screening programs, the costs of consulting with experts under sub. (5), and the costs  
24 of administering the congenital disorder program under this section and shall credit  
25 these amounts to the appropriation accounts under s. 20.435 (1) (ja) and (jb).

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1           **SECTION 3.** 253.13 (3) of the statutes is amended to read:

2           253.13 **(3)** EXCEPTIONS. This section shall not apply if the parents or legal  
3 guardian of the child object thereto on the grounds that the test conflicts with their  
4 religious tenets and practices. No tests may be performed under sub. (1) ~~or~~, (1g), or  
5 (1m) unless the parents or legal guardian are fully informed of the purposes of testing  
6 under this section and have been given reasonable opportunity to object as  
7 authorized in this subsection or in sub. (1m) to such tests.

8           **SECTION 4.** 253.13 (4) of the statutes is amended to read:

9           253.13 **(4)** CONFIDENTIALITY OF TESTS AND RELATED INFORMATION. The state  
10 laboratory of hygiene shall provide the test results for testing under subs. (1) and  
11 (1m) to the physician, who shall advise the parents or legal guardian of the results.  
12 The physician, nurse-midwife licensed under s. 441.15, or certified professional  
13 midwife licensed under s. 440.982 who arranged for testing under sub. (1g) shall  
14 advise the parents or legal guardian of the test results under sub. (1g). No  
15 information obtained under this section from the parents or guardian or from blood  
16 or urine specimens from the infant may be disclosed except for use in statistical data  
17 compiled by the department without reference to the identity of any individual and  
18 except as provided in s. 146.82 (2). The state laboratory of hygiene board shall  
19 provide to the department the names and addresses of parents of infants who have  
20 positive test results from tests performed under sub. (1), (1g), or (1m).

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(END)