

## 2009 DRAFTING REQUEST

### Bill

Received: 01/28/2009

Received By: **tdodge**

Wanted: **As time permits**

Identical to LRB:

For: **Julie Lassa (608) 266-3123**

By/Representing: **Jessica Kelly**

This file may be shown to any legislator: **NO**

Drafter: **tdodge**

May Contact: **Rep. Dexter's office**  
**Rep. Kaufert's office**

Addl. Drafters:

Subject: **Health - public health**

Extra Copies:

Submit via email: **YES**

Requester's email: **Sen.Lassa@legis.wisconsin.gov**

Carbon copy (CC:) to:

---

### Pre Topic:

No specific pre topic given

---

### Topic:

Newborn hearing screening test

---

### Instructions:

See attached

---

### Drafting History:

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/?	tdodge 02/13/2009	wjackson 03/03/2009		_____			S&L
/P1	tdodge 09/02/2009	wjackson 09/04/2009	phenry 03/04/2009	_____	cduerst 03/04/2009		S&L
/1			mduchek 09/08/2009	_____	sbasford 09/08/2009	sbasford 09/15/2009	

FE Sent For:

*at  
intro*

<END>

## 2009 DRAFTING REQUEST

### Bill

Received: **01/28/2009**

Received By: **tdodge**

Wanted: **As time permits**

Identical to LRB:

For: **Julie Lassa (608) 266-3123**

By/Representing: **Jessica Kelly**

This file may be shown to any legislator: **NO**

Drafter: **tdodge**

May Contact: **Rep. Dexter's office**  
**Rep. Kaufert's office**

Addl. Drafters:

Subject: **Health - public health**

Extra Copies:

Submit via email: **YES**

Requester's email: **Sen.Lassa@legis.wisconsin.gov**

Carbon copy (CC:) to:

---

### Pre Topic:

No specific pre topic given

---

### Topic:

Newborn hearing screening test

---

### Instructions:

See attached

---

### Drafting History:

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/?	tdodge 02/13/2009	wjackson 03/03/2009		_____			S&L
/P1	tdodge 09/02/2009	wjackson 09/04/2009	phenry 03/04/2009	_____	cduerst 03/04/2009		S&L
/1			mduchek 09/08/2009	_____	sbasford 09/08/2009		

FE Sent For:

**<END>**

**2009 DRAFTING REQUEST**

**Bill**

Received: **01/28/2009**

Received By: **tdodge**

Wanted: **As time permits**

Identical to LRB:

For: **Julie Lassa (608) 266-3123**

By/Representing: **Jessica Kelly**

This file may be shown to any legislator: **NO**

Drafter: **tdodge**

May Contact: **Rep. Dexter's office**  
**Rep. Kaufert's office**

Addl. Drafters:

Subject: **Health - public health**

Extra Copies:

Submit via email: **YES**

Requester's email: **Sen.Lassa@legis.wisconsin.gov**

Carbon copy (CC:) to:

---

**Pre Topic:**

No specific pre topic given

---

**Topic:**

Newborn hearing screening test

---


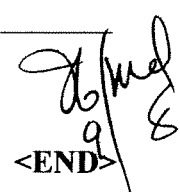
**Instructions:**

See attached

---

**Drafting History:**

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/?	tdodge 02/13/2009	wjackson 03/03/2009		_____			S&L
/P1	tdodge	1/wlj 9/2	phenry 03/04/2009 wd 9/4	_____	cduerst 03/04/2009		

FE Sent For:   **<END>**

## 2009 DRAFTING REQUEST

### Bill

Received: 01/28/2009

Received By: **tdodge**

Wanted: As time permits

Identical to LRB:

For: **Dean Kaufert (608) 266-5719**

By/Representing: **Adam Field**

This file may be shown to any legislator: **NO**

Drafter: **tdodge**

May Contact:

Addl. Drafters:

Subject: **Health - public health**

Extra Copies:

Submit via email: **YES**

Requester's email: **Rep.Kaufert@legis.wisconsin.gov**

Carbon copy (CC:) to:

---

### Pre Topic:

No specific pre topic given

---

### Topic:

Newborn hearing test

---

### Instructions:

See attached

---

### Drafting History:

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/?	tdodge 02/13/2009	wjackson 03/03/2009		_____			S&L
/P1			phenry 03/04/2009	_____	cduerst 03/04/2009		

FE Sent For:

<END>

**2009 DRAFTING REQUEST**

**Bill**

Received: **01/28/2009**

Received By: **tdodge**

Wanted: **As time permits**

Identical to LRB:

For: **Dean Kaufert (608) 266-5719**

By/Representing: **Adam Field**

This file may be shown to any legislator: **NO**

Drafter: **tdodge**

May Contact:

Addl. Drafters:

Subject: **Health - public health**

Extra Copies:

Submit via email: **YES**

Requester's email: **Rep.Kaufert@legis.wisconsin.gov**

Carbon copy (CC:) to:

---

**Pre Topic:**

No specific pre topic given

---

**Topic:**

Newborn hearing test

---

**Instructions:**

See attached

---

**Drafting History:**

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
--------------	----------------	-----------------	--------------	----------------	------------------	-----------------	-----------------

/?	tdodge						
----	--------	--	--	--	--	--	--

1/1 WLj 3/3

3/4  
Dh

3/4  
Dh/JF

FE Sent For:

<END>

## Dodge, Tamara

---

**From:** Field, Adam  
**Sent:** Tuesday, January 27, 2009 5:47 PM  
**To:** Dodge, Tamara  
**Subject:** Bill Draft Request

**Attachments:** NBS - latest suggested language 12.02.08.doc

Hi Tamara,

Rep. Kaufert would like to do a bill draft requiring newborns in Wisconsin to be given a hearing test. Enclosed is some suggested language of what he was looking for. I know things are busy for you all with the budget right now, so this is not an urgent one, just wanted to get it in the system. Feel free to let me know if you have any follow up questions.

Thanks,

Adam



NBS - latest  
suggested languag..

---

**Adam R. Field**

Office of Rep. Dean Kaufert  
55th Assembly District



253.13

**253.13 Tests for congenital disorders.**

253.13(1)

**(1) Blood tests.** The attending physician or nurse licensed under s. 441.15 shall cause every infant born in each hospital or maternity home, prior to its discharge therefrom, to be subjected to blood tests for congenital and metabolic disorders, as specified in rules promulgated by the department. If the infant is born elsewhere than in a hospital or maternity home, the attending physician, nurse licensed under s. 441.15 or birth attendant who attended the birth shall cause the infant, within one week of birth, to be subjected to these blood tests.

253.13(1m)

**(1m) Urine tests.** The department may establish a urine test program to test infants for causes of congenital disorders. The state laboratory of hygiene board may establish the methods of obtaining urine specimens and testing such specimens, and may develop materials for use in the tests. No person may be required to participate in programs developed under this subsection.

253.13(1n)

**(1n) Hearing tests. The attending physician or nurse licensed under s. 441.15 shall cause every infant born in each hospital to be subjected to tests under a newborn hearing screening program prior to discharge or within one month of birth. If the infant is born elsewhere than in a hospital, the attending physician, nurse licensed under s. 441.15 or birth attendant who attended the birth shall cause the infant, within one month of birth, to be subjected to tests under a newborn hearing screening program.**

253.13(2)

**(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 and to furnish materials for use in the tests. The department shall provide necessary diagnostic services, special dietary treatment as prescribed by a physician for a patient with a congenital disorder as identified by tests under sub. (1) 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 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 appropriations under s. 20.435 (1) (jb) and (5) (ja).

253.13(3)

**(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~~, (1m) **or (1n)** 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.

253.13(4)

**(4) Confidentiality of tests and related information.** The state laboratory of hygiene shall provide the test results to the physician, who shall advise the parents or legal guardian of the results. No information obtained under this section from the parents or guardian or from 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.

253.13(5)

**(5) Related services.** The department shall disseminate information to families whose children suffer from congenital disorders and to women of child-bearing age with a history of congenital disorders concerning the need for and availability of follow-up counseling and special dietary treatment and the necessity for testing infants. The department shall also refer families of children who suffer from congenital disorders to available health services programs and shall coordinate the provision of these programs. The department shall periodically consult appropriate experts in reviewing and evaluating the state's infant screening programs.



State of Wisconsin  
2009 - 2010 LEGISLATURE

LRB-1830<sup>001</sup>

TJD:.....

WJ

RmNR

In: 2/13/09

**PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION**

Soon  
please

D-N

Gen Cat

1 AN ACT ...; relating to: requiring newborn hearing screening.

Also  
under  
current  
law

*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. ~~Currently~~, hospitals must make newborn hearing screening available for all infants delivered at the hospital. This bill requires the attending physician or nurse-midwife, or birth attendant for an infant not born in a hospital, to arrange for testing to determine whether the infant has a hearing loss for all infants within 30 days of birth.

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:*

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

3 253.13 (1g) HEARING SCREENING. (a) In this subsection:

4 1. "Hearing loss" has the meaning given in s. 253.115 (1) (a). ✓

5 2. "Hospital" has the meaning given in s. 50.33 (2). ✓

**SECTION 1**

1 (b) The attending physician or nurse-midwife licensed under s. 44<sup>1</sup>.15 who  
 2 attended a birth, or the birth attendant who attended a birth if the infant was not  
 3 born in a hospital, shall arrange for the infant to be tested within 30 days of birth to  
 4 determine if the infant has a hearing loss.

5 **SECTION 2.** 253.13 (2) of the statutes is amended to read:

6 253.13 (2) TESTS; DIAGNOSTIC, DIETARY AND FOLLOW-UP COUNSELING PROGRAM;  
 7 FEES. The department shall contract with the state laboratory of hygiene to perform  
 8 the tests specified under ~~this section~~ subs. (1) and (1m) and to furnish materials for  
 9 use in the tests. The department shall provide necessary diagnostic services, special  
 10 dietary treatment as prescribed by a physician for a patient with a congenital  
 11 disorder as identified by tests under sub. (1) or (1m) and follow-up counseling for the  
 12 patient and his or her family. The state laboratory of hygiene board, on behalf of the  
 13 department, shall impose a fee for tests performed under ~~this section~~ subsection  
 14 sufficient to pay for services provided under the contract. The state laboratory of  
 15 hygiene board shall include as part of this fee amounts the department determines  
 16 are sufficient to fund the provision of diagnostic and counseling services, special  
 17 dietary treatment, and periodic evaluation of infant screening programs, the costs  
 18 of consulting with experts under sub. (5), and the costs of administering the  
 19 congenital disorder program under this section and shall credit these amounts to the  
 20 appropriations under s. 20.435 (1) (jb) and (5) (ja).

**History:** 1977 c. 160; 1983 a. 157; 1985 a. 255; 1987 a. 27; 1989 a. 31; 1991 a. 39, 177; 1993 a. 27 s. 316; Stats. 1993 s. 253.13; 1995 a. 27 s. 9126 (19); 2001 a. 16, 52;  
 2007 a. 20 s. 9121 (6) (a).

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

22 253.13 (3) EXCEPTIONS. This section shall not apply if the parents or legal  
 23 guardian of the child object thereto on the grounds that the test conflicts with their  
 24 religious tenets and practices. No tests may be performed under sub. (1) or, (1g), or

1 (1m) unless the parents or legal guardian are fully informed of the purposes of testing  
2 under this section and have been given reasonable opportunity to object as  
3 authorized in this subsection or in sub. (1m) to such tests.

History: 1977 c. 160; 1983 a. 157; 1985 a. 255; 1987 a. 27; 1989 a. 31; 1991 a. 39, 177; 1993 a. 27 s. 316; Stats. 1993 s. 253.13; 1995 a. 27 s. 9126 (19); 2001 a. 16, 52; 2007 a. 20 s. 9121 (6) (a).

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

5 253.13 (4) CONFIDENTIALITY OF TESTS AND RELATED INFORMATION. The state  
6 laboratory of hygiene shall provide the test results for testing under subs. (1) and  
7 (1m) to the physician, who shall advise the parents or legal guardian of the results.

8 The attending physician, nurse-midwife licensed under s. 44<sup>1</sup>.15, or birth attendant  
9 who arranged for testing under sub. (1g) shall advise the parents or legal guardian  
10 of the results of the testing under sub. (1g). No information obtained under this  
11 section from the parents or guardian or from specimens from the infant may be  
12 disclosed except for use in statistical data compiled by the department without  
13 reference to the identity of any individual and except as provided in s. 146.82 (2). The  
14 state laboratory of hygiene board shall provide to the department the names and  
15 addresses of parents of infants who have positive test results from testing performed  
16 under sub. (1) or (1m).

History: 1977 c. 160; 1983 a. 157; 1985 a. 255; 1987 a. 27; 1989 a. 31; 1991 a. 39, 177; 1993 a. 27 s. 316; Stats. 1993 s. 253.13; 1995 a. 27 s. 9126 (19); 2001 a. 16, 52; 2007 a. 20 s. 9121 (6) (a).

17 (END)

D-N

**DRAFTER'S NOTE  
FROM THE  
LEGISLATIVE REFERENCE BUREAU**

LRB-1830/dn

TJD:.....

Wlj

Date

To Adam Field:

Please review this preliminary draft to make sure it complies with your intent. Please pay particular attention to the following:

1. The drafting instructions required that a physician or nurse-midwife arrange for screening either before discharge from the hospital or within one month of birth. Since the ~~time~~ periods overlap with "within one month of birth" or 30 days, typically being the longer time, I have eliminated the "before discharge" language. If you would rather require the screening be arranged before discharge from a hospital with some exceptions, please let me know.

2. Please review my changes to the subsections in s. 253.13<sup>✓</sup> to confirm they are consistent with your intent. Please pay particular attention to s. 253.13 (4), which, as drafted, subjects the newborn hearing screening test results to the confidentiality requirements but does not require that the test results be sent to the department.

3. Section 253.13 is included in appropriations under s. 20.435 (1) (jb)<sup>✓</sup> and (5) (ja)<sup>✓</sup>. The fee structure under s. 253.13 (2)<sup>✓</sup> allows for collection of fees for the state laboratory of hygiene. Since the newborn hearing screening presumably would not be performed by the state laboratory of hygiene, I limited the contracts and fee collection to the other types of testing. Do you want to make any changes to the fee collection or appropriations to accommodate the newborn hearing screening?

Tamara J. Dodge  
Legislative Attorney  
Phone: (608) 267-7380  
E-mail: tamara.dodge@legis.wisconsin.gov

**DRAFTER'S NOTE**  
**FROM THE**  
**LEGISLATIVE REFERENCE BUREAU**

LRB-1830/P1dn  
TJD:wlj:ph

March 3, 2009

To Adam Field:

Please review this preliminary draft to make sure it complies with your intent. Please pay particular attention to the following:

1. The drafting instructions require that a physician or nurse-midwife arrange for screening either before discharge from the hospital or within one month of birth. Since the periods overlap with "within one month of birth," or 30 days, typically being the longer time, I have eliminated the "before discharge" language. If you would rather require the screening be arranged before discharge from a hospital with some exceptions, please let me know.
2. Please review my changes to the subsections in s. 253.13 to confirm they are consistent with your intent. Please pay particular attention to s. 253.13 (4), which, as drafted, subjects the newborn hearing screening test results to the confidentiality requirements but does not require that the test results be sent to the department.
3. Section 253.13 is included in appropriations under s. 20.435 (1) (jb) and (5) (ja). The fee structure under s. 253.13 (2) allows for collection of fees for the state laboratory of hygiene. Since the newborn hearing screening presumably would not be performed by the state laboratory of hygiene, I limited the contracts and fee collection to the other types of testing. Do you want to make any changes to the fee collection or appropriations to accommodate the newborn hearing screening?

Tamara J. Dodge  
Legislative Attorney  
Phone: (608) 267-7380  
E-mail: tamara.dodge@legis.wisconsin.gov

## Dodge, Tamara

---

**From:** Kelly, Jessica  
**Sent:** Tuesday, August 25, 2009 1:53 PM  
**To:** Dodge, Tamara  
**Cc:** Field, Adam; Peterson, Ilsa  
**Subject:** LRB 1830/P1 changes

Good morning. Senator Lassa was approached to offer LRB 1830/P1 regarding newborn hearing screening for children born outside of hospitals.

We had a meeting this morning regarding some changes to the legislation that I'm hoping you can turn around relatively quickly. I understand that Adam Field in Kaufert's office originally put this into drafting and I have cc'ed him on this email. It will now be a Lassa/Dexter bill (companions).

Page 2 line 1-4 should read:

(b) the attending physician, nurse-midwife licensed under s. 44.15, or certified professional midwife licensed under 440.982, who attended a 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.

Page 2 line 9 ... The Department shall provide necessary diagnostic and follow-up services...

Page 2, line 11 "disorder as identified by tests under sub. (1), (1g) or (1m)

Page 3 line 5 "laboratory of hygiene shall provide the test results for testing under subs. (1), (1g) and (1m)"

Page 3 line 7 "The attending physician, nurse-midwife licensed under s.44.15 or certified professional midwife licensed under 440.982"

Page 3 line 10 "section from the parents or guardian or from blood or urine specimens"

Page 3 line 15 "under sub. (1), (1g) or (1m).

I want to also make sure that, according to your drafter's note in #2, that we ensure that the newborn hearing screening test results ARE sent to the department.

Any ideas as to when this new draft can be turned around?

Thanks.

*Jessica Ford Kelly*

Office of Senator Julie Lassa  
State Capitol, Room 323 South  
P.O. Box 7882  
Madison, WI 53708  
1-800-925-7491 tollfree  
608-266-3123 local  
608-267-6797 fax



**Dodge, Tamara**

---

**From:** Kelly, Jessica  
**Sent:** Wednesday, August 26, 2009 11:52 AM  
**To:** Dodge, Tamara  
**Subject:** FW: LRB 1830/P1 changes

Tami,

Can you just leave the language as is, please?

---

**From:** Currans-Sheehan, Rachel H - DHS [mailto:Rachel.CurransSheehan@dhs.wisconsin.gov]  
**Sent:** Wednesday, August 26, 2009 11:32 AM  
**To:** Kelly, Jessica; Peterson, Ilsa  
**Cc:** Seeliger, Elizabeth L - DHS  
**Subject:** RE: LRB 1830/P1 changes

Jessica and Ilsa:

Elizabeth and I spoke on this issue. The Lab of Hygiene will know the newborn screening results for the majority of cases. They have obtained these since 2002 because hospitals include the results on the card they submit to the Lab of Hygiene. (There are systems in place to collect the results for home births as well). We absolutely agree with both of you that we DO NOT want to alter the way that results are getting to the lab. Newborn hearing screening, while performed at the hospital, the results are included on the card that is sent to the State Lab of Hygiene. We agree that it is fine that the providers be responsible for sharing the hearing screening results with the family, but the data transmission be left as is. We would not recommend adding a sentence that would require the attending physician, nurse-midwife, or certified professional midwife to report the test results directly to the department because the department receives these currently from the Lab of Hygiene.

The best contact at the State Lab of Hygiene is Gary Hoffman. He is the Newborn Screening Laboratory Director.

Thanks,

Rachel H. Currans-Sheehan  
 Legislative Liaison  
 Department of Health Services  
 Phone: (608) 266-3262  
 Email: rachel.curranssheehan@wisconsin.gov

---

**From:** Kelly, Jessica [mailto:Jessica.Kelly@legis.wisconsin.gov]  
**Sent:** Wednesday, August 26, 2009 11:12 AM  
**To:** Peterson, Ilsa - LEGIS  
**Cc:** Seeliger, Elizabeth L - DHS; Currans-Sheehan, Rachel H - DHS  
**Subject:** RE: LRB 1830/P1 changes

My thought was that if we create another avenue for these cards to go after the kid leaves the hospital, we're going to have an "administrative nightmare".

Elizabeth and Rachel, any ideas?

---

**From:** Peterson, Ilsa  
**Sent:** Wednesday, August 26, 2009 11:06 AM

8/26/2009

**To:** Kelly, Jessica  
**Subject:** RE: LRB 1830/P1 changes

I think that there would be a problem having the provider supply the answer to the department, but again we can run it by the docs and others. I think we should just run these questions by DHS and the state lab. In the meeting Elizabeth said she had talked to the State Lab and they were ok with the changes. Maybe she can tell us who her contact is.

I would also add that because the rest of the information is running through the lab we know that there is an established route for the information to travel. I worry that other information wouldn't be transferred if we remove it from the existing reporting process.

Just my couple thoughts. Yours?

**Ilsa Peterson**  
Office of Representative Kristen Dexter  
68th Assembly District  
Phone: (608) 266-9172  
Toll Free: (888) 534-0068

---

**From:** Kelly, Jessica  
**Sent:** Tuesday, August 25, 2009 5:10 PM  
**To:** Peterson, Ilsa  
**Subject:** Fwd: LRB 1830/P1 changes

Sent from my iPhone

Begin forwarded message:

**From:** "Dodge, Tamara" <Tamara.Dodge@legis.wisconsin.gov>  
**Date:** August 25, 2009 4:43:46 PM CDT  
**To:** "Kelly, Jessica" <Jessica.Kelly@legis.wisconsin.gov>  
**Subject:** RE: LRB 1830/P1 changes

Jessica,

I should be able to work on this draft soon and have it done within a week. I am not sure how long it is taking to get drafts through editing, but I can try to expedite it if you need the draft soon. If you have a specific date by which you need the draft, please let me know.

Looking at the revisions, I had one immediate concern. I see you added the hearing screening section to some of the sentences regarding the state laboratory of hygiene. My concern is that the state laboratory of hygiene, as I understand the testing, wouldn't have anything to do with the testing and wouldn't have the results. (If I am wrong about that, please let me know.) While the blood and urine samples are sent to the state lab for testing, the hearing screening is done in or near the hospital where the infant is born. I have already put the requirement for disclosing the results to the parents on the health care provider who arranged for the test because I don't believe the state lab would have the results. Would it be okay to just add a sentence that would require the attending physician, nurse-midwife, or certified professional midwife to report the test results to the department?

When I take a closer look at the draft, I may have some more questions.

8/26/2009

Thanks.

Tami

**Tamara J. Dodge**

Attorney

Wisconsin Legislative Reference Bureau

P.O. Box 2037

Madison, WI 53701-2037

(608) 267 - 7380

[tamara.dodge@legis.wisconsin.gov](mailto:tamara.dodge@legis.wisconsin.gov)

---

**From:** Kelly, Jessica

**Sent:** Tuesday, August 25, 2009 1:53 PM

**To:** Dodge, Tamara

**Cc:** Field, Adam; Peterson, Ilsa

**Subject:** LRB 1830/P1 changes

Good morning. Senator Lassa was approached to offer LRB 1830/P1 regarding newborn hearing screening for children born outside of hospitals.

We had a meeting this morning regarding some changes to the legislation that I'm hoping you can turn around relatively quickly. I understand that Adam Field in Kaufert's office originally put this into drafting and I have cc'ed him on this email. It will now be a Lassa/Dexter bill (companions).

Page 2 line 1-4 should read:

(b) the attending physician, nurse-midwife licensed under s. 44.15, or certified professional midwife licensed under 440.982, who attended a 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.

Page 2 line 9 ... The Department shall provide necessary diagnostic and follow-up services...

Page 2, line 11 "disorder as identified by tests under sub. (1), (1g) or (1m)

Page 3 line 5 "laboratory of hygiene shall provide the test results for testing under subs. (1), (1g) and (1m)"

Page 3 line 7 "The attending physician, nurse-midwife licensed under s.44.15 or certified professional midwife licensed under 440.982"

Page 3 line 10 "section from the parents or guardian or from blood or urine specimens"

Page 3 line 15 "under sub. (1), (1g) or (1m).

I want to also make sure that, according to your drafter's note in #2, that we ensure that the newborn hearing screening test results ARE sent to the department.

8/26/2009

Any ideas as to when this new draft can be turned around?

Thanks.

*Jessica Ford Kelly*

Office of Senator Julie Lassa

State Capitol, Room 323 South

P.O. Box 7882

Madison, WI 53708

1-800-925-7491 tollfree

608-266-3123 local

608-267-6797 fax



State of Wisconsin  
2009 - 2010 LEGISLATURE

LRB-1830/PI 51

TJD:wlj:ph

In: 9/2/09 soon

stays ↑  
RMNR

**PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION**

D-note

Regen

- 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.

**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. This bill requires the attending physician or nurse-midwife, or birth attendant for an infant not born in a hospital, to arrange for testing for all infants within 30 days of birth to determine whether the infant has a hearing loss.

INS A

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:**

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

4 253.13 (1g) HEARING SCREENING. (a) In this subsection:

5 1. "Hearing loss" has the meaning given in s. 253.115 (1) (a). ✓

6 2. "Hospital" has the meaning given in s. 50.33 (2). ✓

INS 2-1

1 (b) The attending physician or nurse-midwife licensed under s. 441.15 who  
2 attended a birth, or the birth attendant who attended a birth if the infant was not  
3 born in a hospital, shall arrange for the infant to be tested within 30 days of birth to  
4 determine if the infant has a hearing loss.

5 SECTION 2. 253.13 (2) of the statutes is amended to read:

6 253.13 (2) TESTS; DIAGNOSTIC, DIETARY AND FOLLOW-UP COUNSELING PROGRAM;  
7 FEES. The department shall contract with the state laboratory of hygiene to perform  
8 the tests specified under ~~this section~~ subs. (1) and (1m) and to furnish materials for  
9 use in the tests. The department shall provide necessary diagnostic services, special  
10 dietary treatment as prescribed by a physician for a patient with a congenital  
11 disorder as identified by tests under sub. (1) or (1m) and follow-up counseling for the  
12 patient and his or her family. The state laboratory of hygiene board, on behalf of the  
13 department, shall impose a fee for tests performed under ~~this section~~ subsection  
14 sufficient to pay for services provided under the contract. The state laboratory of  
15 hygiene board shall include as part of this fee amounts the department determines  
16 are sufficient to fund the provision of diagnostic and counseling services, special  
17 dietary treatment, and periodic evaluation of infant screening programs, the costs  
18 of consulting with experts under sub. (5), and the costs of administering the  
19 congenital disorder program under this section and shall credit these amounts to the  
20 appropriations under s. 20.435 (1) (jb) and (5) (ja).

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

22 253.13 (3) EXCEPTIONS. This section shall not apply if the parents or legal  
23 guardian of the child object ~~thereto~~ <sup>↓ ↓</sup> on the grounds that the test conflicts with their  
24 religious tenets and practices. No tests may be performed under sub. (1) ~~or~~ (1g), or  
25 (1m) unless the parents or legal guardian are fully informed of the purposes of testing

1 under this section and have been given reasonable opportunity to object as  
2 authorized in this subsection or in sub. (1m) to such tests.

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

4 253.13 (4) CONFIDENTIALITY OF TESTS AND RELATED INFORMATION. The state  
5 laboratory of hygiene shall provide the test results for testing under subs. (1) and  
6 (1m) to the physician, who shall advise the parents or legal guardian of the results.

7 The attending physician, nurse-midwife licensed under s. 441.15, or birth attendant

8 who arranged for testing under sub. (1g) shall advise the parents or legal guardian

9 of the <sup>test</sup> results of the testing under sub. (1g). No information obtained under this

10 section from the parents or guardian or from blood or urine specimens from the infant may be

11 disclosed except for use in statistical data compiled by the department without

12 reference to the identity of any individual and except as provided in s. 146.82 (2). The

13 state laboratory of hygiene board shall provide to the department the names and

14 addresses of parents of infants who have positive test results from <sup>tests</sup> testing performed

15 under sub. (1) or (1m). <sup>(1g)</sup>

16 (END)

D-note

certified professional  
midwife licensed under  
S. 440.0982

1 INSERT A

*performs tests on the blood samples*

*(Not)*

The state laboratory of hygiene *performs the tests*, 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)*

*the* This bill requires the *attending* physician, nurse-midwife, or certified professional midwife who attended a 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 *attending* physician, nurse-midwife, or certified professional midwife who attended the birth *is also* required under the bill to advise the parents or legal guardian of the infant of the hearing test results. This bill requires the state laboratory of hygiene to provide additional follow-up services and to report positive hearing screening results to *the*

*Must also*

*DHS*  
*2* *departments*

*also*

3 INSERT 2-1

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

8 SECTION ~~#~~ 253.13 (2) of the statutes, as affected by 2009 Wisconsin Act 28, is  
9 amended to read:

10 253.13 (2) TESTS; DIAGNOSTIC, DIETARY AND FOLLOW-UP COUNSELING PROGRAM;  
11 FEES. The department shall contract with the state laboratory of hygiene to perform  
12 the tests specified under ~~this section~~ *subs. (1) and (1m)* and to furnish materials for  
13 use in the tests. The department shall provide necessary diagnostic and follow-up  
14 services, special dietary treatment as prescribed by a physician for a patient with a  
15 congenital disorder as identified by tests under sub. (1), *(1g)*, or (1m), and follow-up  
16 counseling for the patient and his or her family. The state laboratory of hygiene  
(17) board, on behalf of the department, shall impose a fee for tests performed under ~~this~~



the Contract ✓

1 section subsection sufficient to pay for services provided under the contract. The  
2 state laboratory of hygiene board shall include as part of this fee amounts the  
3 department determines are sufficient to fund the provision of diagnostic and  
4 counseling services, special dietary treatment, and periodic evaluation of infant  
5 screening programs, the costs of consulting with experts under sub. (5), and the costs  
6 of administering the congenital disorder program under this section and shall credit  
7 these amounts to the appropriation accounts under s. 20.435 (1) (ja) and (jb).

**History:** 1977 c. 160; 1983 a. 157; 1985 a. 255; 1987 a. 27; 1989 a. 31; 1991 a. 39, 177; 1993 a. 27 s. 316; Stats. 1993 s. 253.13; 1995 a. 27 s. 9126 (19); 2001 a. 16, 52; 2007 a. 20 s. 9121 (6) (a); 2009 a. 28.

D-note

**DRAFTER'S NOTE  
FROM THE  
LEGISLATIVE REFERENCE BUREAU**

LRB-1830/1dn

TJD:.....

WLj

Date

To Jessica Kelly:

*and have made a few wording changes  
for clarity*

\* I changed this draft as you requested. I have a concern that this draft may be confusing to those people who are not familiar with the screening program's inner workings and are only reading 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.

I have prepared this draft for Senator Lassa. If Representative Dexter's office would like a companion bill, I can prepare one upon their request.

Tamara J. Dodge  
Legislative Attorney  
Phone: (608) 267-7380  
E-mail: tamara.dodge@legis.wisconsin.gov

**DRAFTER'S NOTE  
FROM THE  
LEGISLATIVE REFERENCE BUREAU**

LRB-1830/1dn  
TJD:wlj:md

September 8, 2009

To Jessica Kelly:

I changed this draft as you requested and have made a few wording changes for clarity. I have a concern 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.

I have prepared this draft for Senator Lassa. If Representative Dexter's office would like a companion bill, I can prepare one upon their request.

Tamara J. Dodge  
Legislative Attorney  
Phone: (608) 267-7380  
E-mail: [tamara.dodge@legis.wisconsin.gov](mailto:tamara.dodge@legis.wisconsin.gov)

**Basford, Sarah**

---

**From:** Kelly, Jessica  
**Sent:** Tuesday, September 15, 2009 12:18 PM  
**To:** LRB.Legal  
**Subject:** Draft Review: LRB 09-1830/1 Topic: Newborn hearing screening test

Please Jacket LRB 09-1830/1 for the SENATE.