

State of Misconsin 2013 - 2014 LEGISLATURE



2013 SENATE BILL 523

1	AN ACT to repeal 253.13 (1m); to renumber and amend 253.13 (4); to amend
2	253.13 (1), (2) and (3) and 253.13 (4) (title); and <i>to create</i> 253.13 (4) (b) of the
3	statutes; relating to: tests administered to newborns for congenital disorders.

Analysis by the Legislative Reference Bureau

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

4 **SECTION 1.** 253.13 (1), (2) and (3) of the statutes are amended to read: 253.13 (1) BLOOD TESTS TESTS; REQUIREMENTS. The attending physician or nurse 5 6 licensed under s. 441.15 shall cause every infant born in each hospital or maternity 7 home, prior to its discharge therefrom, to be subjected to blood tests for congenital 8 and metabolic disorders, as specified in rules promulgated by the department. If the 9 infant is born elsewhere than in a hospital or maternity home, the attending 10 physician, nurse licensed under s. 441.15, or birth attendant who attended the birth 11 shall cause the infant, within one week of birth, to be subjected to these blood tests.

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1 (2) TESTS: DIAGNOSTIC, DIETARY AND FOLLOW-UP COUNSELING PROGRAM; FEES. The 2 department shall contract with the state laboratory of hygiene to perform the any 3 tests specified under this section that are laboratory tests and to furnish materials 4 for use in the tests. The department shall provide necessary diagnostic services, 5 special dietary treatment as prescribed by a physician for a patient with a congenital 6 disorder as identified by tests under sub. (1) or (1m) this section, and follow-up 7 counseling for the patient and his or her family. The department shall impose a fee, 8 by rule, for tests performed under this section sufficient to pay for services provided 9 under the contract. The department shall include as part of the fee established by 10 rule amounts to fund the provision of diagnostic and counseling services, special 11 dietary treatment, and periodic evaluation of infant screening programs, the costs of consulting with experts under sub. (5), the costs of administering the hearing 1213screening program under s. 253.115, and the costs of administering the congenital 14disorder program under this section and shall credit these amounts to the 15appropriation accounts under s. 20.435 (1) (ja) and (jb).

(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 <u>or with their personal convictions</u>. No tests may be performed under <u>sub. (1) or (1m) this section</u> 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.

23 SECTION 2. 253.13 (1m) of the statutes is repealed.

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

25 253.13 (4) (title) CONFIDENTIALITY OF TESTS AND RELATED INFORMATION REPORTING.

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1 SECTION 4. 253.13 (4) of the statutes is renumbered 253.13 (4) (a) and amended 2 to read:

3 253.13 (4) (a) The state laboratory of hygiene shall provide the its laboratory 4 test results to the physician, who shall advise the parents or legal guardian of the $\mathbf{5}$ results. No information obtained under this section from the parents or guardian or 6 from specimens from the infant tests performed under this section may be disclosed 7 except for use in statistical data compiled by the department without reference to the 8 identity of any individual and except as provided in s. 146.82 (2). The state 9 laboratory of hygiene board shall provide to the department the names and 10 addresses of parents of infants who have positive test results.

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SECTION 5. 253.13 (4) (b) of the statutes is created to read:

12 253.13 (4) (b) The department may require reporting in connection with the
13 tests performed under this section for use in statistical data compilation and for
14 evaluation of infant screening programs.

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(END)