

Fiscal Estimate - 2023 Session

Original
 Updated
 Corrected
 Supplemental

LRB Number 23-5505/1	Introduction Number AB-1057
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Description
 the procedure for adding federal newborn screening recommendations to the state-required newborn screenings, granting rule-making authority, and providing an exemption from emergency rule procedures

Fiscal Effect

State:

No State Fiscal Effect
 Indeterminate

<input type="checkbox"/> Increase Existing Appropriations	<input type="checkbox"/> Increase Existing Revenues	<input checked="" type="checkbox"/> Increase Costs - May be possible to absorb within agency's budget
<input type="checkbox"/> Decrease Existing Appropriations	<input type="checkbox"/> Decrease Existing Revenues	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Create New Appropriations		<input type="checkbox"/> Decrease Costs

Local:

No Local Government Costs
 Indeterminate

1. <input type="checkbox"/> Increase Costs <input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory	3. <input type="checkbox"/> Increase Revenue <input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory	5. Types of Local Government Units Affected <input type="checkbox"/> Towns <input type="checkbox"/> Village <input type="checkbox"/> Cities <input type="checkbox"/> Counties <input type="checkbox"/> Others <input type="checkbox"/> 0 <input type="checkbox"/> School Districts <input type="checkbox"/> WTCS Districts
2. <input type="checkbox"/> Decrease Costs <input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory	4. <input type="checkbox"/> Decrease Revenue <input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory	

Fund Sources Affected	Affected Ch. 20 Appropriations
<input type="checkbox"/> GPR <input type="checkbox"/> FED <input checked="" type="checkbox"/> PRO <input type="checkbox"/> PRS <input type="checkbox"/> SEG <input type="checkbox"/> SEGS	20.435 (1)(ja) (1)(jb) and 20.285 (1)(i)

Agency/Prepared By	Authorized Signature	Date
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Fiscal Estimate Narratives

DHS 2/21/2024

LRB Number	23-5505/1	Introduction Number	AB-1057	Estimate Type	Original
Description the procedure for adding federal newborn screening recommendations to the state-required newborn screenings, granting rule-making authority, and providing an exemption from emergency procedures					

Assumptions Used in Arriving at Fiscal Estimate

The Wisconsin Newborn Screening Program is jointly managed by the Department of Health Services and the Wisconsin State Lab of Hygiene (WSLH), at the University of Wisconsin. The Department is responsible for overall program management and the delivery of specialized dietary and other services to individuals who test positive for congenital disorders. WSLH is responsible for conducting tests on blood samples and reporting the results.

This proposal requires the Department to pursue a new process for adding conditions to the list of required screenings for Wisconsin's Newborn Screening Program. Under current law, conditions are added to the screening panel based on the recommendation of the DHS Secretary's Advisory Committee on Newborn Screening (SACNBS). Individuals can nominate conditions to the committee for review. The proposal for a new condition then goes through a formal process of subcommittee evaluation, committee evaluation, and recommendations to the Secretary. In addition to the current process for nominating conditions, this proposal requires review of all conditions listed on the Recommended Uniform Newborn Screening panel (RUSP), which is maintained by the federal Department of Health and Human Services, for potential addition to the screening panel. Every condition currently on the RUSP not screened for in Wisconsin, and all future additions, must be reviewed for addition to the panel.

There are two sets of recommendations from the Recommended Uniform Screening Panel (RUSP): the core and secondary recommendations. Currently, there are only 4 conditions on the core list that Wisconsin does not include in its screening program, but 17 with the inclusion of both the core and secondary lists. WSLH indicates that it would cost between \$60,000 and \$662,000 in annual costs in staffing, materials and laboratory equipment costs for each condition added to the screening panel. This large range is based on the fact that different testing methodologies would be used based on the condition being tested for. As a result, the fiscal impact on the WSLH is indeterminate. However, for illustrative purposes, if four new conditions were added at the average cost of these two conditions, the annual cost increase would be \$1.4 million. Assuming that 65,000 bloodcards are purchased annually, covering the increased cost would require raising card fee revenue by \$22.21 per card.

The Department provides services to each infant who tests positive for these conditions for specialty follow up care. These services are funded with revenue from the fee charged to families of newborns to conduct blood sample tests. The increase in service costs is indeterminate. The increase in the number of children receiving services is likely to be low, given the low probability of a positive screening. At the same, the cost of specialty care varies widely by condition and individual and can be quite costly in some cases.

Long-Range Fiscal Implications