



## Fiscal Estimate Narratives

DHS 6/4/2025

LRB Number	<b>25-2216/1</b>	Introduction Number	<b>AB-0206</b>	Estimate Type	<b>Original</b>
<b>Description</b> 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					

### 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. The addition of each condition increases WSLH testing costs. The number of conditions to be added as a result of the legislation is unknown, and so the fiscal effect on WSLH is indeterminate.

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 number of conditions to be added as a result of the legislation is unknown, and so the fiscal effect on the Department is indeterminate.

### Long-Range Fiscal Implications