State of Wisconsin



2009 Senate Bill 323

Date of enactment: May 11, 2010 Date of publication*: May 25, 2010

2009 WISCONSIN ACT 279

AN ACT *to amend* 20.435 (1) (ja), 20.435 (1) (jb), 253.115 (title) and 253.13 (2); and *to create* 253.115 (1) (title), 253.115 (2) (title), 253.115 (3) (title) and 253.115 (4), (5), (6), (7) and (8) of the statutes; **relating to:** requiring newborn hearing screening and making an appropriation.

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

SECTION 1. 20.435 (1) (ja) of the statutes, as affected by 2009 Wisconsin Act 28, is amended to read:

20.435 (1) (ja) Congenital disorders; diagnosis, special dietary treatment and counseling. The amounts in the schedule to provide diagnostic services, special dietary treatment, and follow–up counseling for congenital disorders and periodic evaluation of infant screening programs as specified under s. 253.13 and to provide referrals under s. 253.115. All moneys received by the department under s. 253.13 (2), less the amounts appropriated under par. (jb), shall be credited to this appropriation account.

SECTION 2. 20.435 (1) (jb) of the statutes is amended to read:

20.435 (1) (jb) Congenital disorders; operations. From all moneys received under s. 253.13 (2), the amounts in the schedule to be used to administer the program programs under s. ss. 253.115 and 253.13 and for the costs of consulting with appropriate experts as specified in s. 253.13 (5).

SECTION 3. 253.115 (title) of the statutes is amended to read:

253.115 (title) Newborn hearing screening programs. **SECTION 4.** 253.115 (1) (title) of the statutes is created to read:

253.115 (1) (title) DEFINITIONS.

SECTION 5. 253.115 (2) (title) of the statutes is created to read:

253.115 (2) (title) SCREENING PROGRAM REPORT.

SECTION 6. 253.115 (3) (title) of the statutes is created to read:

253.115 (3) (title) HOSPITAL SCREENING PROGRAM.

SECTION 7. 253.115 (4), (5), (6), (7) and (8) of the statutes are created to read:

253.115 (4) SCREENING REQUIRED. Except as provided in sub. (6), the physician, nurse–midwife licensed under s. 441.15, or certified professional midwife licensed under s. 440.982 who attended the birth shall ensure that the infant is screened for hearing loss before being discharged from a hospital, or within 30 days of birth if the infant was not born in a hospital.

(5) REFERRAL TO FOLLOW–UP SERVICES. The department shall provide referrals to intervention programs for hearing loss.

(6) EXCEPTIONS. (a) Subsection (4) does not apply if the parents or legal guardian of the child object to a screen for hearing loss on the grounds that the test conflicts with their religious tenets and practices.

^{*} Section 991.11, WISCONSIN STATUTES 2007–08 : Effective date of acts. "Every act and every portion of an act enacted by the legislature over the governor's partial veto which does not expressly prescribe the time when it takes effect shall take effect on the day after its date of publication as designated" by the secretary of state [the date of publication may not be more than 10 working days after the date of enactment].

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(b) No screening may be performed under sub. (4) unless the parents or legal guardian are fully informed of the purposes of a screen for hearing loss and have been given reasonable opportunity to object under par. (a) to the screen.

(7) SCREENING RESULTS. (a) The physician, nursemidwife licensed under s. 441.15, or certified professional midwife licensed under s. 440.982 who is required to ensure that the infant is screened for hearing loss under sub. (4) shall do all of the following:

1. Ensure the parents or legal guardian are advised of the screening results.

2. If the infant has an abnormal hearing screening result, ensure the parents or legal guardian are provided information on available resources for diagnosis and treatment of hearing loss.

3. Send to the state laboratory of hygiene board screening results and the infant's risk factors to contract a hearing loss.

(b) The state laboratory of hygiene board shall send the information provided under par. (a) 3. to the department.

(8) CONFIDENTIALITY. Except as provided under pars. (a) 3. and (b), no information obtained under this section from the parents or legal guardian 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).

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

253.13 (2) TESTS; DIAGNOSTIC, DIETARY AND FOL-LOW-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), the costs of administering the hearing screening program under s. 253.115, and the costs of administering the congenital disorder program under this section and shall credit these amounts to the appropriation accounts under s. 20.435 (1) (ja) and (jb).