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State of Misconsin 2013 - 2014 LEGISLATURE



2013 SENATE BILL 523

January 27, 2014 – Introduced by Senators Vukmir, Petrowski, L. Taylor, Carpenter, Cowles, Darling, Hansen, Lassa, Lehman, Leibham and Olsen, cosponsored by Representatives Strachota, Kleefisch, Ballweg, Berceau, Bies, Billings, Brooks, Clark, Genrich, Goyke, Hebl, Kahl, Krug, Mason, Murphy, Mursau, Nass, A. Ott, Ripp, Rodriguez, Sanfelippo, Spiros, Tittl and Wright. Referred to Committee on Health and Human Services.

AN ACT to repeal 253.13 (1m); to renumber and amend 253.13 (4); to amend

253.13 (1), (2) and (3) and 253.13 (4) (title); and to create 253.13 (4) (b) of the

statutes; relating to: tests administered to newborns for congenital disorders.

Analysis by the Legislative Reference Bureau

Under current law, blood tests for congenital and metabolic disorders (infant blood tests), as specified in rules promulgated by the Department of Health Services (DHS), must be performed on every infant born in a hospital or maternity home prior to the infant's discharge. If an infant is born elsewhere than in a hospital or maternity home, these infant blood tests must be performed within one week of birth. Also under current law, DHS may establish a urine testing program to test infants for causes of congenital disorders (infant urine testing program), in which no person is required to participate. DHS must, under current law, contract with the State Laboratory of Hygiene (SLH) to perform any required infant tests and to furnish materials for use in those tests and must, by rule, impose a fee for infant testing to cover various specified costs. Current law imposes confidentiality requirements on information obtained from parents or a legal guardian in connection with infant testing or obtained from infant testing specimens.

This bill eliminates the provision related to establishing an infant urine testing program and modifies the provision relating to infant blood tests so that the required tests, as specified in rules promulgated by DHS, may be any kind of test. Information obtained from these required infant tests are subject to the same confidentiality requirements as under current law. The bill provides that DHS must contract with

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the SLH to perform any required infant tests that are laboratory tests and to furnish materials for use in the tests. The bill also provides that DHS may require reporting in connection with any required infant tests for use in statistical data compilation and for evaluation of infant screening programs. The bill does not affect provisions in current law relating to newborn hearing screenings.

Also under current law, the infant blood test and infant urine testing program provisions do not apply if the parents or legal guardian of the child object on the grounds that the test conflicts with their religious tenets and practices. The bill retains this provision with respect to any required infant tests and provides that, in addition, the parents or legal guardian of the child may object on the grounds that a required infant test conflicts with their personal convictions.

For further information see the *state* 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:

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 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.

(2) Tests; diagnostic, dietary and follow-up counseling program; fees. The department shall contract with the state laboratory of hygiene to perform the any tests specified under this section that are laboratory tests 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) this section, and follow-up counseling for the patient and his or her family. The department shall impose a fee,

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by rule, for tests performed under this section sufficient to pay for services provided under the contract. The department shall include as part of the fee established by rule amounts 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).

- (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 or with their personal convictions. No tests may be performed under sub. (1) or (1m) this section 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.
- **Section 2.** 253.13 (1m) of the statutes is repealed.
- **Section 3.** 253.13 (4) (title) of the statutes is amended to read:
- 18 253.13 (4) (title) Confidentiality of tests and related information reporting.
- Section 4. 253.13 (4) of the statutes is renumbered 253.13 (4) (a) and amended to read:

253.13 (4) (a) The state laboratory of hygiene shall provide the <u>its laboratory</u> 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 <u>tests performed under this section</u> may be disclosed except for use in statistical data compiled by the department without reference to the

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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.

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

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

8 (END)