

HOUSE BILL 714

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CF SB 786

By: **Delegates Hucker, Barkley, Cullison, Dwyer, Feldman, Frush, Gaines, Gilchrist, Holmes, Jameson, Kaiser, A. Kelly, Kramer, Niemann, Reznik, S. Robinson, Summers, V. Turner, Valentino-Smith, and Waldstreicher**
Introduced and read first time: February 10, 2011
Assigned to: Health and Government Operations

A BILL ENTITLED

1 AN ACT concerning

2 **Health – Newborn Screening Program – Critical Congenital Heart Disease**

3 FOR the purpose of requiring that the Department of Health and Mental Hygiene’s
4 Newborn Screening Program include screening for critical congenital heart
5 disease.

6 BY repealing and reenacting, with amendments,
7 Article – Health – General
8 Section 13–111
9 Annotated Code of Maryland
10 (2009 Replacement Volume and 2010 Supplement)

11 Preamble

12 WHEREAS, Congenital heart disease is the most common birth defect and
13 affects approximately eight out of every 1,000 infants each year; and

14 WHEREAS, More than 36,000 infants are born with congenital heart disease
15 each year in the United States; and

16 WHEREAS, Congenital heart disease is the leading cause of death for infants
17 born with a birth defect despite survival rates now approaching 96% for all affected
18 children; and

19 WHEREAS, A major cause of infant mortality as a result of congenital heart
20 disease is that a significant number of children affected are not detected as having
21 heart disease in the newborn nursery; and

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.
[Brackets] indicate matter deleted from existing law.



1 WHEREAS, An effective newborn screening mechanism for congenital heart
2 disease before newborns leave the nursery can reduce infant mortality; and

3 WHEREAS, Pulse oximetry has been shown to be an effective screening test to
4 detect congenital heart disease before infants leave the newborn nursery; and

5 WHEREAS, Children's National Medical Center has worked with Holy Cross
6 Hospital to become leaders in the implementation of pulse oximetry screening in
7 community nurseries; and

8 WHEREAS, The Secretary of Health and Human Services' Advisory Committee
9 for Heritable Disorders in Newborns and Children recommended the addition of
10 screening for critical cyanotic congenital heart disease to the core panel for universal
11 screening of all newborns in the United States; now, therefore,

12 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
13 MARYLAND, That the Laws of Maryland read as follows:

14 **Article – Health – General**

15 13–111.

16 (a) The Department shall establish a coordinated statewide system for
17 screening all newborn infants in the State for certain hereditary and congenital
18 disorders associated with severe problems of health or development, except when the
19 parent or guardian of the newborn infant objects.

20 (b) Except as provided in § 13–112 of this subtitle, the Department's public
21 health laboratory is the sole laboratory authorized to perform tests on specimens from
22 newborn infants collected to screen for hereditary and congenital disorders as
23 determined under subsection (d)(2) of this section.

24 (c) The system for newborn screening shall include:

25 (1) Laboratory testing and the reporting of test results; [and]

26 (2) Follow-up activities to facilitate the rapid identification and
27 treatment of an affected child; AND

28 **(3) SCREENING FOR CRITICAL CONGENITAL HEART DISEASE.**

29 (d) In consultation with the State Advisory Council on Hereditary and
30 Congenital Disorders, the Department shall:

31 (1) Establish protocols for a health care provider to obtain and deliver
32 test specimens to the Department's public health laboratory;

1 (2) Determine the screening tests that the Department's public health
2 laboratory is required to perform;

3 (3) Maintain a coordinated statewide system for newborn screening
4 that carries out the purpose described in subsection (c) of this section that includes:

5 (i) Communicating the results of screening tests to the health
6 care provider of the newborn infant;

7 (ii) Locating newborn infants with abnormal test results;

8 (iii) Sharing newborn screening information between hospitals,
9 health care providers, treatment centers, and laboratory personnel; and

10 (iv) Delivering needed clinical, diagnostic, and treatment
11 information to health care providers, parents, and caregivers; and

12 (4) Adopt regulations that set forth the standards and requirements
13 for newborn screening for hereditary and congenital disorders that are required under
14 this subtitle, including:

15 (i) Performing newborn screening tests;

16 (ii) Coordinating the reporting, follow-up, and treatment
17 activities with parents, caregivers, and health care providers; and

18 (iii) Establishing fees for newborn screening that do not exceed
19 an amount sufficient to cover the administrative, laboratory, and follow-up costs
20 associated with the performance of screening tests under this subtitle.

21 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
22 July 1, 2011.