

BILL ANALYSIS

Senate Research Center
82R1416 EES-D

C.S.S.B. 229
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Health & Human Services
3/23/2011
Committee Report (Substituted)

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

About three in 1,000 newborns in the country are born with some form of hearing loss, and the loss of hearing can delay speech and other developmental milestones. Detecting hearing loss early can help prevent delays in speaking and learning.

Current state law requires birthing facilities to offer newborn hearing screening, but limits this requirement to birthing facilities and birthing centers located in counties with a population of more than 50,000. This means that children born in smaller counties, of which there are many in Texas, may not receive a hearing screening.

C.S.S.B. 229 would remove these exemptions for birthing facilities and birthing centers located in counties with a population of less than 50,000.

C.S.S.B. 229 amends current law relating to newborn hearing screenings and hearing services for certain children.

[**Note:** While the statutory reference in this bill is to the Texas Department of Health (TDH), the following amendments affect the Department of State Health Services (DSHS), as the successor agency to TDH.]

RULEMAKING AUTHORITY

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Section 47.001(2), Health and Safety Code, as follows:

(2) Redefines "birthing facility" to mean:

(A) a hospital licensed under Chapter 241 (Hospitals) that offers obstetrical services; or

(B) a birthing center licensed under Chapter 244 (Birthing Centers).

(C) a children's hospital; or

(D) a facility, maintained or operated by this state or an agency of this state, that provides obstetrical services.

Deletes existing text relating to hospitals licensed under Chapter 241 being located in a county with a population of more than 50,000. Deletes existing text relating to birthing centers located in a county with a population of more than 50,000 and that has 100 or more births per year.

SECTION 2. Amends Chapter 47, Health and Safety Code, by adding Section 47.0035, as follows:

Sec. 47.0035. REFERRAL TO PROGRAM BY MIDWIFE. (a) Defines "midwife" in this section.

(b) Provides that a midwife who attends the birth of a newborn:

(1) is not required to offer the parents of a newborn a hearing screening for the newborn for the identification of hearing loss; and

(2) is required to refer the parents of the newborn to a birthing facility or a provider that participates in the program if the birth of the newborn does not occur at a birthing facility.

SECTION 3. Amends Section 47.007, Health and Safety Code, by amending Subsections (a) and (c) and adding Subsections (d), (e), (f) and (g), as follows:

(a) Requires the Texas Department of Health (TDH) to provide each birthing facility that provides newborn hearing screening under the state's medical assistance program provided under Chapter 32 (Medical Assistance Program), Human Resources Code, with access to the appropriate information management, reporting, and tracking system, rather than software, for the program. Requires that the information management, reporting, and tracking system be capable of providing TDH with information and data necessary to plan, monitor, and evaluate the program, including the program's screening, follow-up, diagnostic, and intervention components.

(c) Requires a birthing facility described by Subsection (a) to report the resulting information in the format and within the time frame specified by TDH.

(d) Requires a qualified hearing screening provider, audiologist, intervention specialist, educator, or other person who receives a referral from a program under this chapter to:

(1) provide the services needed by the child or refer the child to a person who provides the services needed by the child; and

(2) provide, with the consent of the child's parent, the following information to TDH or TDH's designee results of follow-up care, results of audiologic testing of infants identified with hearing loss, and reports on the initiation of intervention services.

(e) Requires a qualified hearing screening provider, audiologist, intervention specialist, educator, or other person who provides service to infants who are diagnosed with hearing loss to provide, with consent of the infant's parent, the following information to TDH or TDH's designee:

(1) results of follow-up services;

(2) results of audiologic testing of infants identified with hearing loss; and

(3) reports on the initiation of intervention services.

(f) Requires a hospital that provides services under this chapter to use the information management, reporting, and tracking system, which TDH has provided the hospital with access to, to report, with the consent of the infant's parent, the following information to TDH or TDH's designee:

(1) results of all follow-up services for infants who do not pass the birth admission screening if the hospital provides the follow-up services; or

(2) the name of the provider or facility where the hospital refers an infant who does not pass the birth admission screening for follow-up services.

(g) Creates this subsection from existing text. Requires TDH to ensure that the written consent of a parent is obtained before any information individually identifying the newborn or infant is released through the information management, reporting, and tracking system.

SECTION 4. Repealer: Section 47.002 (Applicability of Chapter), Health and Safety Code.

SECTION 5. Provides that, notwithstanding Section 47.001(2), Health and Safety Code, as amended by this Act, the change in law made by this Act applies only to a birth admission at a birthing facility on or after September 1, 2012.

SECTION 6. Effective date: September 1, 2011.