

## **BILL ANALYSIS**

Senate Research Center

H.B. 2478  
By: Klick et al. (Blanco)  
Health & Human Services  
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Engrossed

### **AUTHOR'S / SPONSOR'S STATEMENT OF INTENT**

The Department of State Health Services (DSHS) reports using its public health laboratory to screen the nearly 400,000 infants born in Texas each year for 57 different medical conditions. In conducting these screenings, state law requires DSHS to follow the federal Recommended Uniform Screening Panel as state funding allows. In 2019, the 86th Texas Legislature established a dedicated account for newborn screenings to provide a consistent and long-term funding stream to maintain current laboratory testing and keep up with recommended screenings. DSHS currently must submit a report to the governor, lieutenant governor, speaker of the house of representatives, and applicable legislative committees if money appropriated from the newborn screening preservation account is used to add an additional newborn screening test. DSHS does not report information related to a recommended screening test that has not yet been added.

H.B. 2478 seeks to replace the current reporting requirement with an annual report listing the core conditions for which testing is recommended in the federal Recommended Uniform Screening Panel but for which DSHS does not currently test.

H.B. 2478 amends current law relating to newborn and infant screening tests.

### **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 Subchapter B, Chapter 33, Health and Safety Code, by adding Section 33.020, as follows:

Sec. 33.020. ANNUAL REPORT. (a) Requires the Department of State Health Services (DSHS), for each newborn screening test that screens for a disorder included in the list of core conditions described by Section 33.011(a-1) (relating to requiring DSHS to require newborn screening tests to screen for certain disorders) that is not required by DSHS, not later than September 1 of each year, to prepare and submit a written report to the governor, the lieutenant governor, the speaker of the house of representatives, and each standing committee of the legislature having primary jurisdiction over DSHS. Requires that the written report:

- (1) identify any additional program capacity or resources DSHS would need to implement the additional newborn screening test and to require each newborn in the state to receive the additional newborn screening test; and
- (2) summarize the plan for implementing and requiring the additional newborn screening test, including by identifying any potential barriers to implementation and the anticipated implementation date.

(b) Requires that the report, as part of the plan described by Subsection (a)(2), include information on whether DSHS is capable of implementing the required additional newborn screening test within a 24-month period.

SECTION 2. Amends Section 33.052, Health and Safety Code, by adding Subsection (a-1), as follows:

(a-1) Authorizes DSHS to use money appropriated under Subsection (a) (relating to providing that the newborn screening preservation account is a dedicated account in the general revenue fund) to ensure that the laboratory established by DSHS or a laboratory approved by DSHS under Section 33.016 (Approval of Laboratories) is available seven days a week to perform screening tests required by DSHS under Section 33.011 (Test Requirement).

SECTION 3. Amends Chapter 47, Health and Safety Code, by adding Section 47.0032, as follows:

Sec. 47.0032. TESTING FOR CONGENITAL CYTOMEGALOVIRUS. (a) Defines "congenital cytomegalovirus."

(b) Requires the program that performed a hearing screening under Section 47.003 (Newborn Hearing Screening, Tracking, and Intervention Program), if a newborn or infant does not pass the screening, to perform or cause to be performed a test for congenital cytomegalovirus on the newborn or infant unless the newborn's or infant's parent declines the test.

(c) Requires the entity that performed a test for congenital cytomegalovirus, if the newborn or infant receives a positive test, to provide the newborn's or infant's parents with:

- (1) the results of the test;
- (2) information on the potential effects of congenital cytomegalovirus and the available treatment options; and
- (3) a referral to an appropriate physician or facility for the treatment of congenital cytomegalovirus.

SECTION 4. Repealer: Section 33.054 (Report), Health and Safety Code.

SECTION 5. Makes application of Section 47.0032, Health and Safety Code, as added by this Act, prospective.

SECTION 6. Effective date: September 1, 2023.