HOUSE BILL REPORT
ESB 5141

As Reported By House Committee On:
Health Care

Title: An act relating to newborn screening fees.

Brief Description: Allowing the department of health to charge a fee for newborn screening services.

Sponsors: Senators Thibaudeau, Deccio, Prentice and Winsley; by request of Department of Health.

Brief History:
Committee Activity:
Health Care: 3/30/99, 4/1/99 [DP].

Brief Summary of Engrossed Bill

- Provides funding for genetic disorder services, which will replace declining federal resources.

HOUSE COMMITTEE ON HEALTH CARE

Majority Report: Do pass. Signed by 11 members: Representatives Cody, Democratic Co-Chair; Parlette, Republican Co-Chair; Pflug, Republican Vice Chair; Schual-Berke, Democratic Vice Chair; Alexander; Boldt; Campbell; Conway; Edmonds; Mulliken and Ruderman.

Staff: Bill Hagens (786-7131).

Background:

All newborn infants born in this state must be screened for several inherited genetic disorders before they are discharged from the hospital. This screening is only waived if there is parental objection for religious reasons. The Department of Health assesses a one-time charge for the screening which is added to the bill for maternity services. The current fee is $35.75.

The newborn screening is done to detect four congenital diseases: phenylketonuria (PKU), congenital hypothyroidism, congenital adrenal hyperplasia, and hemoglobin diseases, such as sickle cell disease. Early treatment of these disorders prevents serious illness, disability or death in children.

The newborn screening fee does not cover follow-up treatment services for children. Clinics which service these families have been funded largely by federal grants which expire this year.

Summary of Bill:

The Department of Health is authorized to collect an additional fee for supplying services in specialty clinics to children with congenital hypothyroidism, congenital adrenal hyperplasia, hemoglobin disorders and phenyketonuria (PKU) under the state's infant screening program.

Appropriation: None.

Fiscal Note: Requested on March 25, 1999.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Testimony For: These programs prevent the serious repercussions of these congenital disorders.

Testimony Against: None.

Testified: Elizabeth Ward, Department of Health; Dr. Ron Scott, University of Washington Clinic; Dr. Mark Walters, University of Washington Comprehensive Sickle Cell Program; Elizabeth Babler, Mary Bridge Children's Hospital Sickle Cell Clinic; Sarah Youssefi, PKU patient; and Matt Christensen, PKU parent.