
**Children & Family Services
Committee**

ESSB 5416

Brief Description: Requiring screening of pregnant and lactating women for nonprescription use of controlled substances.

Sponsors: Senate Committee on Human Services & Corrections (originally sponsored by Senators Patterson, Stevens, Long, Hargrove, Rossi, Winsley, McAuliffe and Rasmussen).

Brief Summary of Engrossed Substitute Bill

- Requires primary health care providers to screen pregnant or lactating women for nonprescription use of controlled substances.
- Requires health care providers to screen pregnant women who seek health care at the time of delivery and indicate they have had little or no prenatal health care for nonprescription use of controlled substances.
- Requires the health care providers, if the results of the screening indicate the need to test the infant, to convey this need to the infant's primary health care provider, or, to conduct the testing themselves.

Hearing Date: 2/25/02

Staff: Deborah Frazier (786-7152).

Background:

A 1997 report prepared by the Research and Data Analysis division of the Department of Social and Health Services (DSHS) estimated that 8-10,000 infants are born in Washington annually to women who used alcohol or drugs during pregnancy. This number represents approximately 10-12% of all annual births in the state.

Infants born to these women are considered to be *drug-exposed*. The number of infants with measurable effects that can be attributed to substance use during pregnancy is estimated to be approximately 800-1,000 per year, or about one percent of births. These infants are considered to be *drug-affected*.

In the 1998 legislative session, a bill containing, among others, the screening provisions of ESSB 5416 passed both houses. The Governor vetoed a number of these provisions. Remaining provisions that went into effect required the DSHS to develop definitions for both "alcohol-affected infant" and "drug-affected infant." These definitions are currently in rule. The bill also required the Department of Health (DOH) and the DSHS to develop a comprehensive plan to serve substance abusing women and their children.

Another bill enacted after the 1998 legislative session required the DOH to develop assessment and testing criteria for drug-affected infants, and training protocols for medical professionals. These screening guidelines and training protocols have been developed.

In 1999 the budget bill appropriated specific funding for the development and implementation of comprehensive programs for alcohol and drug abusing mothers and their young children. The three pilots were initiated in January, 2000. Snohomish and Benton Franklin counties provide the full inventory of services, including residential treatment. Whatcom County provides targeted intensive case management and utilizes existing outpatient chemical dependency treatment resources. The pilots are serving over 100 women plus their children, and have waiting lists.

Summary of Bill:

Primary health care providers are required to screen pregnant or lactating women for nonprescription use of controlled substances. Screening criteria may include, but is not limited to, that previously developed by the DOH.

Health care providers are required to screen pregnant women who seek health care at the time of delivery and indicate they have had little or no prenatal health care for nonprescription use of controlled substances. Screening criteria may include, but is not limited to, that previously developed by the DOH.

If the results of the screening indicate the need to test the infant, the health care providers are required to convey this need to the infant's primary health care provider, or, to conduct the testing themselves.

The wording of the current statute requiring the DOH to develop screening criteria is modified to eliminate the term "baby" and insert "infant".

Appropriation: None.

Fiscal Note: Requested on 2/19/02.

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