

FINAL BILL REPORT

HB 2403

C 70 L 16
Synopsis as Enacted

Brief Description: Concerning Down syndrome resources.

Sponsors: Representatives Kochmar, Senn, Griffey, Appleton, Walsh, Wylie, Scott, Ryu, McCabe, Stambaugh, Short, Magendanz, Caldier, Hickel, Wilson, Zeiger, Muri, Kilduff and McBride.

House Committee on Health Care & Wellness
Senate Committee on Health Care

Background:

Down syndrome is a lifelong condition caused during cell division when the presence of an extra copy of chromosome 21 develops. According to the United States Centers for Disease Control and Prevention, approximately 6,000 babies are born in the United States each year with Down syndrome. It is the most common chromosomal condition diagnosed in the United States.

While every person with Down syndrome has different abilities, people with Down syndrome may have physical and intellectual challenges, such as hearing loss, obstructive sleep apnea, ear infections, eye diseases, or heart defects. Early treatment including speech therapy, physical therapy, occupational therapy, or educational therapy may help persons with Down syndrome improve their skills.

Down syndrome may be detected during pregnancy through either a screening test or a diagnostic test. The screening test involves a combination of a blood test and an ultrasound. Diagnostic tests are usually performed after a positive screening test and involves an examination of material from either the placenta, amniotic fluid, or the umbilical cord.

Summary:

The Department of Health (Department) must develop resources related to Down syndrome to be made available for distribution to expectant parents who receive a positive prenatal diagnosis of Down syndrome and parents who receive a postnatal diagnosis of Down syndrome. The resources must provide up-to-date, evidence-based, written information about Down syndrome and people with Down syndrome that has been reviewed by medical

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experts and Down syndrome associations. The resources must present contact information for support services, including information hotlines, clearinghouses, and national and local organizations. The resources must also be culturally and linguistically appropriate. The resources must address physical, developmental, educational, and psychosocial outcomes; life expectancy; clinical course; and intellectual and functional development and therapy options.

The Department must distribute the resources to specified health care providers and facilities to give to expecting parents and parents with a prenatal or postnatal diagnosis of Down syndrome. The health care providers and facilities include midwives, osteopathic physicians, osteopathic physician's assistants, physicians, physician assistants, nurses, genetic counselors, hospitals, and birthing centers.

Votes on Final Passage:

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|--------|----|---|
| House | 97 | 1 |
| Senate | 47 | 0 |

Effective: June 9, 2016