#### SESSION OF 2007

## SUPPLEMENTAL NOTE ON HOUSE BILL NO. 2224

### As Amended by House Committee on Appropriations

## Brief\*

HB 2224 would amend the law regarding the newborn screening program. The Department of Health and Environment (KDHE) would be directed to adopt rules and regulations no later than July 1, 2008, to require newborn screening tests for the disorders recommended in the 2005 report by the American College of Medical Genetics entitled "Newborn Screening: Toward a Uniform Screening Panel and System." The Secretary of Health and Environment would be required to appoint an advisory committee regarding the implementation of the expanded screening program. KDHE also would be directed to periodically review the newborn screening program, including program efficacy, cost effectiveness, and whether program adjustments need to be made.

The bill would allow a designee of the agency to conduct the initial laboratory screening tests.

The bill also would eliminate language requiring KDHE and the Kansas Health Policy Authority to combine purchase powers for the purchase of treatment products.

# Background

The 2006 Legislature directed the agency to meet with an advisory group of concerned stakeholders to draft a plan for expansion of the state's mandatory newborn metabolic screening program. Represented parties included Medicaid, the

<sup>\*</sup>Supplemental notes are prepared by the Legislative Research Department and do not express legislative intent. The supplemental note and fiscal note for this bill may be accessed on the Internet at http://www.kslegislature.org

Kansas Hospital Association, insurance trade groups, the Kansas Chapter of the American Academy of Pediatrics, and KDHE staff.

The House Social Services Budget Committee held a hearing on the bill. Proponents of the bill included the Director of the Division of Health, KDHE; the Director of Health Policy for Kansas Action for Children; the President-Elect of the Kansas Chapter of the American Academy of Pediatrics; the State Director of the March of Dimes; the Vice President of Government Relations of the Kansas Hospital Association; the Sisters of Charity of Leavenworth Health Systems; and several parents. Conferees indicated that only two other states screen for as few conditions as Kansas, and no state screens for less diseases than Kansas. The March of Dimes and the American College of Medical Genetics recommends that states screen for 29 treatable conditions.

The House Appropriations Committee amended the bill to remove the \$30 fee per newborn for the screening.

There were no opponents to the bill.

The fiscal note on the original bill estimates total expenditures of \$1,189,942, including \$191,000 from the State General Fund, and 5.0 FTE positions. Expenditures would include \$882,402 for new laboratory costs, \$116,537 for new followup costs, and \$191,000 for new treatment product costs. The fee for each newborn is estimated to generate revenues of \$1,170,000.