SENATE BILL REPORT SHB 3201

As of Second Reading

Title: An act relating to fees for treatment services and outreach for children with heritable disorders.

Brief Description: Fees for infant screening.

- **Sponsors**: House Committee on Ways & Means (originally sponsored by Representatives Pettigrew, Linville, Sullivan and Ericks).
- **Brief History:** Passed House: 3/10/10, 57-40; 55-42 (reconsidered); 3/17/10, 55-39. Committee Activity:

Staff: Jenny Greenlee (786-7711)

Background: Newborn infants born in Washington are screened for several heritable genetic disorders before they are discharged from a hospital. In 2007 screenings were performed for approximately 85,000 newborns. The Department of Health (DOH) assesses a one-time charge for the screening, which is added to billings for maternity services. The current fee is \$60.90 per infant. This newborn screening fee does not cover follow-up treatment services for children who screen positive.

The DOH is authorized to collect an additional fee to fund specialty clinics that provide treatment services for hemoglobin diseases, phenylketonuria, congenital adrenal hyperplasia, and congenital hypothyroidism. The fee is currently set at \$3.50. During the 2005-07 biennium, the Legislature authorized the temporary increase of the fee to \$6.60 to fund the cost of treatment for five additional disorders that had been added to the newborn screening panel. Since 2007 the additional cost has been covered through state General Fund resources.

Summary of Bill: The fee to support specialty clinics that provide services for infants with congenital disorders is increased from \$3.50 to \$8.40. The purposes for which the fee may be used are extended to the support of organizations conducting community outreach, education, and adult support related to sickle cell disease. The fee is a billable expense for the facility that obtains the specimen.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

Appropriation: None.

Fiscal Note: Available. [OFM requested ten-year cost projection pursuant to I-960.]

Committee/Commission/Task Force Created: No.

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