
Health Care & Wellness Committee

SSB 5829

Brief Description: Screening newborn infants for congenital cytomegalovirus.

Sponsors: Senate Committee on Health & Long Term Care (originally sponsored by Senators Frame, Rivers, Shewmake, Trudeau, Lovelett, Dhingra, Hasegawa, Kuderer, Liias, Nobles, Valdez and Wilson, C.).

Brief Summary of Substitute Bill

- Directs the Washington State Board of Health to consider adding congenital cytomegalovirus screening to the mandatory newborn screening panel and to submit a report with the findings and recommendations to the Governor and the Legislature.
- Requires the Department of Health to develop educational materials on cytomegalovirus.

Hearing Date: 2/20/24

Staff: Benjamin Ratcliff (786-7291) and Jim Morishima (786-7191).

Background:

Newborn Screenings.

The Department of Health's (DOH's) Office of Newborn Screening (NBS) tests most newborn infants born in any setting in Washington for a number of congenital disorders. Screening tests are completed by collecting a blood sample from the infant within 48 hours of birth. Screenings are not required for newborn infants whose parents or guardians object to screening tests on the grounds of religious tenets and practices.

The congenital disorders tested for during the screening test are enumerated in the DOH's

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mandatory newborn screening panel. Newborns are screened for a variety of amino acid, endocrine, fatty acid, lysosomal storage, organic acid, and other disorders. The Board of Health (Board) adds tests to the mandatory newborn screening panel only after a consideration of the following criteria: available technology, diagnostic testing, and treatment available; prevention potential and medical rationale; public health rationale; and cost-benefit and cost-effectiveness.

Congenital Cytomegalovirus.

Congenital cytomegalovirus (cCMV) is a congenital infection found in approximately 1 in 200 newborn children. Congenital cytomegalovirus occurs when a pregnant individual is infected with cytomegalovirus (CMV) and subsequently passes the infection to their unborn child. It can result in hearing loss.

Summary of Bill:

The Board must consider whether to add cCMV screening to the mandatory newborn screening panel. The Board must also submit a report to the Governor and Legislature no later than December 31, 2025. The report must include a summary of the Board's evaluation and recommendations regarding the addition of cCMV screening to the mandatory NBS panel.

Subject to appropriated funds, the DOH is required to develop and make available educational resources for pregnant individuals about the nature and consequences of in utero exposure to CMV, as well as strategies to reduce the CMV transmission. The DOH is also required to provide educational materials and outreach for providers regarding strategies to reduce CMV transmission.

Appropriation: None.

Fiscal Note: Available.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.