



February 23, 1999

# HOUSE BILL No. 1410

DIGEST OF HB1410 (Updated February 17, 1999 8:19 pm - DI 58)

**Citations Affected:** IC 16-41; IC 27-8; noncode.

**Synopsis:** Infant hearing loss testing. Adds hearing examinations to the tests required under the newborn screening program. Requires insurance policies and group contracts that provide maternity benefits to pay for the tests required under the newborn screening program. Establishes the newborn hearing screening and intervention advisory board to provide advice and recommendations on issues concerning hearing impairment. Sunsets the board on July 1, 2002. Provides that facilities that have less than 100 births a year are not required to provide infant hearing screening until July 1, 2000.

**Effective:** July 1, 1999.

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**Day, Bosma**

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January 12, 1999, read first time and referred to Committee on Ways and Means.  
February 22, 1999, reported — Do Pass.

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HB 1410—LS 7469/DI 77+



February 23, 1999

First Regular Session 111th General Assembly (1999)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 1998 General Assembly.

## HOUSE BILL No. 1410

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A BILL FOR AN ACT to amend the Indiana Code concerning health.

*Be it enacted by the General Assembly of the State of Indiana:*

- 1 SECTION 1. IC 16-41-17-2 IS AMENDED TO READ AS  
2 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 2. (a) Subject to  
3 subsection ~~(b)~~; (c), every infant shall be given examinations at the  
4 earliest feasible time for the detection of the following disorders:  
5 (1) Phenylketonuria.  
6 (2) Hypothyroidism.  
7 (3) Hemoglobinopathies, including sickle cell anemia.  
8 (4) Galactosemia.  
9 (5) Maple Syrup urine disease.  
10 (6) Homocystinuria.  
11 (7) Inborn errors of metabolism that result in mental retardation  
12 and that are designated by the state department.  
13 (b) **Subject to subsection (c), every infant shall be given a**  
14 **hearing screening examination at the earliest feasible time for the**  
15 **detection of hearing impairments.**  
16 ~~(b)~~ (c) If a parent of an infant objects in writing, for reasons  
17 pertaining to religious beliefs only, the infant is exempt from the

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1 examinations required by this chapter.

2 SECTION 2. IC 16-41-17-7 IS AMENDED TO READ AS  
3 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 7. (a) The state  
4 department shall designate at least one (1) laboratory for testing for  
5 disorders listed in ~~section 2~~ **section 2(a)** of this chapter.

6 (b) The designated laboratories shall perform tests on all infants for  
7 the detection of disorders under **section 2(a)** of this chapter.

8 (c) This section does not prevent other facilities from conducting  
9 tests for disorders under this chapter.

10 SECTION 3. IC 16-41-17-8 IS AMENDED TO READ AS  
11 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 8. Each hospital and  
12 physician shall:

13 (1) take or cause to be taken a blood sample from every infant  
14 born under the hospital's and physician's care; and

15 (2) transport or cause to be transported each blood sample  
16 described in subdivision (1) to a laboratory designated under  
17 section 7 of this chapter;

18 for testing for the disorders listed in ~~section 2~~ **section 2(a)** of this  
19 chapter.

20 SECTION 4. IC 27-8-24-4 IS AMENDED TO READ AS  
21 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 4. Except as provided  
22 in section 5 of this chapter, every policy or group contract that provides  
23 maternity benefits must provide minimum benefits to a mother and her  
24 newborn child that cover:

25 (1) a minimum length of postpartum stay at a hospital licensed  
26 under IC 16-21 that is consistent with the minimum postpartum  
27 hospital stay recommended by the American Academy of  
28 Pediatrics and the American College of Obstetricians and  
29 Gynecologists in their Guidelines for Perinatal Care; **and**

30 (2) **the examinations to the newborn child required under**  
31 **IC 16-41-17-2.**

32 SECTION 5. [EFFECTIVE JULY 1, 1999] (a) **As used in this**  
33 **SECTION, "board" refers to the newborn hearing screening and**  
34 **intervention advisory board established under subsection (b).**

35 (b) **The newborn hearing screening and intervention advisory**  
36 **board is established.**

37 (c) **The board consists of eleven (11) members appointed by the**  
38 **governor as follows:**

39 (1) **One (1) parent of a child with hearing loss.**

40 (2) **One (1) individual who is deaf or hearing impaired.**

41 (3) **One (1) otolaryngologist.**

42 (4) **One (1) audiologist.**



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- 1 (5) One (1) neonatologist or neonatal nurse.  
 2 (6) One (1) pediatrician or family medical practitioner who is  
 3 licensed under IC 25-22.5 whose practice includes services for  
 4 children with hearing loss.  
 5 (7) One (1) teacher of children with hearing loss.  
 6 (8) One (1) representative of the health insurance industry.  
 7 (9) One (1) representative of the state department of health.  
 8 (10) One (1) representative of the department of education,  
 9 division of special education programs.  
 10 (11) One (1) representative of the division of disability, aging,  
 11 and rehabilitative services.
- 12 (d) Initial appointments to the board must be made not later  
 13 than August 1, 1999. Not more than five (5) members of the board  
 14 may be from the same political party.
- 15 (e) The governor shall appoint the chair and vice chair from  
 16 among the board members. The chair and vice chair serve at the  
 17 pleasure of the governor.
- 18 (f) If a vacancy of a member appointed under subsection (c)  
 19 occurs on the board, the governor shall appoint a successor to  
 20 finish the term of the member. The governor must appoint a  
 21 person to fill a vacancy on the board not more than sixty (60) days  
 22 after the vacancy occurs.
- 23 (g) The board shall meet upon the call of the chair. However, the  
 24 board shall meet not less than four (4) times per year. Six (6) board  
 25 members constitute a quorum. Six (6) affirmative votes are  
 26 required for the board to take an action.
- 27 (h) The state department of health shall provide staff support to  
 28 the commission.
- 29 (i) Members of the board shall serve without compensation.
- 30 (j) The board shall do the following:
- 31 (1) Provide the state department of health with advice on  
 32 issues involving hearing impairment concerning:
- 33 (A) educational programs under IC 16-41-17-3;  
 34 (B) appropriate tests under IC 16-41-17-4;  
 35 (C) detection plans and procedures under IC 16-41-17-5;  
 36 (D) the format and information contained in reports under  
 37 IC 16-41-17-6;  
 38 (E) uniform reporting procedures;  
 39 (F) centralized coordination, tracking, and follow-up; and  
 40 (G) appropriate diagnosis and management of affected  
 41 newborns and counseling and support programs for  
 42 newborns' families.

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**(2) Provide governmental agencies and private organizations that serve children with hearing impairments with advice and recommendations concerning:**

**(A) coordination of medical, social, and educational services;**

**(B) appropriate treatment of hearing impaired children and counseling and support programs for the childrens' families; and**

**(C) any other area that would assist children with hearing impairments and their families.**

**(k) This SECTION expires July 1, 2002.**

**SECTION 6. [EFFECTIVE JULY 1, 1999] (a) Notwithstanding IC 16-41-17, as amended by this act, a:**

**(1) hospital, as defined by IC 16-18-2-179(a); or**

**(2) facility other than a hospital;**

**where not more than one hundred (100) births occur annually is not required to provide an infant with a hearing screening examination.**

**(b) This SECTION expires July 1, 2000.**

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COMMITTEE REPORT

Mr. Speaker: Your Committee on Ways and Means, to which was referred House Bill 1410, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill do pass.

BAUER, Chair

Committee Vote: yeas 22, nays 2.

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