340504

	LEGISLATIVE ACTION	
Senate		House
Comm: RCS		
02/09/2022		
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The Committee on Appropriations (Polsky) recommended the following:

Senate Amendment (with title amendment)

3 Delete lines 96 - 129

and insert:

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audiologist, a physician licensed under chapter 458 or chapter 459, or a hospital, or another other newborn hearing screening provider τ for screening for the detection of hearing loss τ to prevent the consequences of unidentified disorders. The referral for appointment must $\frac{\text{shall}}{\text{shall}}$ be made within 7 $\frac{30}{\text{days}}$ days after discharge. Written documentation of the referral must be placed



in the newborn's medical chart.

- (c) If the parent or legal quardian of the newborn objects to the screening, the screening must not be completed. In such case, the physician, midwife, or other person who is attending the newborn shall maintain a record that the screening has not been performed and attach a written objection that must be signed by the parent or quardian.
- (d) For home births, the health care provider in attendance is responsible for coordination and referral to an a licensed audiologist, a hospital, or another other newborn hearing screening provider. The health care provider in attendance must make the referral for appointment shall be made within 7 30 days after the birth. In cases in which the home birth is not attended by a primary health care provider, the newborn's primary health care provider is responsible for coordinating the a referral to a licensed audiologist, physician licensed pursuant to chapter 458 or chapter 459, hospital, or other newborn hearing screening provider must be made by the health care provider within the first 3 months after the child's birth.
- (e) For home births and births in a licensed birth center, if a newborn is referred to a newborn hearing screening provider and the newborn fails the screening for the detection of hearing loss, the newborn's primary health care provider must refer the newborn for administration of a test approved by the United States Food and Drug Administration or another diagnostically equivalent test on the newborn to screen for congenital cytomegalovirus.

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40	And the title is amended as follows:
41	Delete lines 9 - 15
42	and insert:
43	referrals; providing that a newborn's primary health
44	care provider is responsible for coordinating such
45	referrals under certain circumstances; requiring a
46	newborn's primary health care provider to refer the
47	newborn for testing for congenital cytomegalovirus
48	under certain circumstances; revising the timeframe
49	within which