

LEGISLATIVE ACTION .

Senate Comm: RCS 02/09/2022 House

The Committee on Appropriations (Polsky) recommended the following:

Senate Amendment (with title amendment)

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 6 7 provider  $\overline{\tau}$  for screening for the detection of hearing loss  $\overline{\tau}$  to 8 prevent the consequences of unidentified disorders. The referral 9 for appointment must shall be made within 7 30 days after 10 discharge. Written documentation of the referral must be placed

COMMITTEE AMENDMENT

Florida Senate - 2022 Bill No. PCS (304450) for SB 292



11 in the newborn's medical chart.

12 (c) If the parent or legal guardian of the newborn objects 13 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 15 16 been performed and attach a written objection that must be 17 signed by the parent or guardian.

18 (d) For home births, the health care provider in attendance is responsible for coordination and referral to an a licensed 19 audiologist, a hospital, or another other newborn hearing 20 21 screening provider. The health care provider in attendance must 22 make the referral for appointment shall be made within 7 30 days 23 after the birth. In cases in which the home birth is not 24 attended by a primary health care provider, the newborn's 25 primary health care provider is responsible for coordinating the 26 a referral to a licensed audiologist, physician licensed 27 pursuant to chapter 458 or chapter 459, hospital, or other 28 newborn hearing screening provider must be made by the health 29 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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Florida Senate - 2022 Bill No. PCS (304450) for SB 292



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