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1                   A bill to be entitled  
2           An act relating to newborn screening for congenital  
3           heart disease; creating s. 383.146, F.S.; providing  
4           definitions; providing requirements for screening  
5           newborns for congenital heart disease; providing for  
6           certain insurance and managed care coverage; providing  
7           for referral for ongoing services; authorizing the  
8           Department of Health to adopt rules to implement the  
9           screening; providing powers and duties of the  
10          department; providing an effective date.

11  
12          WHEREAS, congenital heart disease is the most common birth  
13          defect in infants, affecting 8 out of every 1,000 newborn  
14          babies, and

15          WHEREAS, early detection of congenital heart disease is  
16          crucial to the health of a newborn baby because, if the  
17          condition goes undiagnosed, it can cause major problems later in  
18          the child's life, and

19          WHEREAS, pulse oximetry is a noninvasive method of  
20          monitoring the oxygen level in the blood and is recommended as a  
21          method of screening a patient for congenital heart disease, and

22          WHEREAS, physical exertion and participation in sports can  
23          cause excess stress on the heart and, if the disease is not  
24          detected and is severe enough, participation in strenuous  
25          activity can result in death, NOW, THEREFORE,

26  
27          Be It Enacted by the Legislature of the State of Florida:  
28

29 Section 1. Section 383.146, Florida Statutes, is created  
 30 to read:

31 383.146 Newborn screening for congenital heart disease.—

32 (1) DEFINITIONS.—As used in this section, the term:

33 (a) "Department" means the Department of Health.

34 (b) "Newborn" means an age range from birth through 29  
 35 days.

36 (c) "Screening" means a test or battery of tests  
 37 administered to determine whether a newborn has congenital heart  
 38 disease.

39 (2) REQUIREMENTS FOR SCREENING OF NEWBORNS; INSURANCE  
 40 COVERAGE; REFERRAL FOR ONGOING SERVICES.—

41 (a) Each licensed hospital or other state-licensed  
 42 birthing facility that provides maternity and newborn care  
 43 services shall provide that all newborns are, prior to  
 44 discharge, screened for congenital heart disease.

45 (b) Each licensed birth center that provides maternity and  
 46 newborn care services shall provide that all newborns are, prior  
 47 to discharge, referred to a physician licensed under chapter 458  
 48 or chapter 459 or a hospital for screening for the detection of  
 49 congenital heart disease. The referral for appointment shall be  
 50 made within 10 days after discharge. Written documentation of  
 51 the referral must be placed in the newborn's medical chart.

52 (c) If the parent or legal guardian of the newborn objects  
 53 to the screening, the screening must not be completed  
 54 notwithstanding any other provision of this section. In such  
 55 case, the physician, midwife, or other person who is attending  
 56 the newborn shall maintain a record that the screening has not

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57 been performed and attach a written objection that must be  
58 signed by the parent or guardian.

59 (d) For home births, the health care provider in  
60 attendance is responsible for the coordination and referral to a  
61 physician licensed under chapter 458 or chapter 459 or a  
62 hospital. The referral for appointment shall be made within 10  
63 days after the birth. In cases in which the home birth is not  
64 attended by a primary health care provider, a referral to a  
65 physician licensed pursuant to chapter 458 or chapter 459 or a  
66 hospital must be made by the health care provider within 10 days  
67 after the child's birth.

68 (e) All newborn and infant screenings shall be conducted  
69 by a physician licensed under chapter 458 or chapter 459.  
70 Appropriate documentation of the screening completion, results,  
71 interpretation, and recommendations must be placed in the  
72 medical record within 24 hours after completion of the screening  
73 procedure.

74 (f) The screening of a newborn for congenital heart  
75 disease must be completed before the newborn is discharged from  
76 the hospital.

77 (g) Each hospital shall formally designate a lead  
78 physician responsible for programmatic oversight for newborn  
79 congenital heart disease screening. Each licensed birth center  
80 shall designate a licensed health care provider to provide such  
81 programmatic oversight and to ensure that the appropriate  
82 referrals are being completed.

83 (h) By October 1, 2012, congenital heart disease screening  
84 must be conducted on all newborns in hospitals in this state on

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85 birth admission. When a newborn is delivered in a facility other  
86 than a hospital, the parents must be instructed on the  
87 importance of having the screening performed and must be given  
88 information to assist them in having the screening performed  
89 within 10 days after the child's birth.

90 (i) The initial procedure for screening of the newborn for  
91 congenital heart disease and any medically necessary followup  
92 reevaluations leading to diagnosis shall be a covered benefit,  
93 reimbursable under Medicaid as an expense compensated  
94 supplemental to the per diem rate for Medicaid patients enrolled  
95 in MediPass or Medicaid patients covered by a fee for service  
96 program. For Medicaid patients enrolled in health maintenance  
97 organizations, providers shall be reimbursed directly by the  
98 Medicaid Program Office at the Medicaid rate. This service may  
99 not be considered a covered service for the purposes of  
100 establishing the payment rate for Medicaid health maintenance  
101 organizations. All health insurance policies and health  
102 maintenance organizations as provided under ss. 627.6416,  
103 627.6579, and 641.31(30), except for supplemental policies that  
104 only provide coverage for specific diseases, hospital indemnity,  
105 or Medicare supplement, or to the supplemental policies, shall  
106 compensate providers for the covered benefit at the contracted  
107 rate. Nonhospital-based providers shall be eligible to bill  
108 Medicaid for the professional and technical component of each  
109 procedure code.

110 (3) RULES.—After consultation with the Genetics and  
111 Newborn Screening Advisory Council, the department shall adopt  
112 and enforce rules requiring that every newborn in this state be

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113 subjected to a test for congenital heart disease. The department  
114 shall adopt such additional rules as are necessary for the  
115 administration of this section, including rules providing  
116 definitions of terms, rules relating to the methods used and  
117 time or times for testing as accepted medical practice  
118 indicates, rules relating to charging and collecting fees for  
119 the administration of the newborn screening program authorized  
120 by this section, rules for processing requests and releasing  
121 test and screening results, and rules requiring mandatory  
122 reporting of the results of tests and screenings for this  
123 condition to the department.

124 (4) POWERS AND DUTIES OF THE DEPARTMENT.—The department  
125 shall administer and provide services authorized pursuant to  
126 this section and shall:

127 (a) Ensure the availability and quality of the necessary  
128 laboratory tests and materials.

129 (b) Furnish all physicians, county health departments,  
130 perinatal centers, birthing centers, and hospitals forms on  
131 which the results of tests for congenital heart disease shall be  
132 reported to the department.

133 (c) Have the authority to charge and collect fees  
134 sufficient to administer the newborn screening program  
135 authorized under this section.

136 Section 2. This act shall take effect July 1, 2012.