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LEGISLATIVE ACTION

Senate

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House

Appropriations Subcommittee on Health and Human Services
(Polsky) recommended the following:

Senate Amendment (with title amendment)

Delete everything after the enacting clause
and insert:

Section 1. Section 383.145, Florida Statutes, is amended to
read:

383.145 Newborn and infant hearing screening.—

(1) LEGISLATIVE INTENT.—It is the intent of the Legislature
~~this section is~~ to provide a statewide comprehensive and
coordinated interdisciplinary program of early hearing loss



764450

11 ~~impairment~~ screening, identification, and follow-up ~~followup~~
12 care for newborns. The goal is to screen all newborns for
13 hearing loss ~~impairment~~ in order to alleviate the adverse
14 effects of hearing loss on speech and language development,
15 academic performance, and cognitive development. It is further
16 the intent of the Legislature that ~~the provisions of this~~
17 section ~~act~~ only be implemented to the extent that funds are
18 specifically included in the General Appropriations Act for
19 carrying out the purposes of this section.

20 (2) DEFINITIONS.—As used in this section, the term:

21 (a) "Audiologist" means a person licensed under part I of
22 chapter 468 to practice audiology ~~"Agency" means the Agency for~~
23 ~~Health Care Administration.~~

24 (b) "Department" means the Department of Health.

25 (c) "Hearing loss ~~impairment~~" means a hearing loss of 30 dB
26 HL or greater in the frequency region important for speech
27 recognition and comprehension in one or both ears, approximately
28 500 through 4,000 hertz.

29 (d) "Hospital" means a facility as defined in s.
30 395.002(13) and licensed under chapter 395 and part II of
31 chapter 408.

32 (e) "Infant" means an age range from 30 days through 12
33 months.

34 (f) ~~(e)~~ "Licensed health care provider" means a physician or
35 physician assistant licensed under ~~pursuant to~~ chapter 458; an
36 osteopathic physician or physician assistant licensed under ~~or~~
37 chapter 459; an advanced practice registered nurse, a registered
38 nurse, or a licensed practical nurse licensed under part I of
39 pursuant to chapter 464; a midwife licensed under chapter 467; ~~T~~



764450

40 or a speech-language pathologist or an audiologist licensed
41 under part I of ~~pursuant to~~ chapter 468, ~~rendering services~~
42 ~~within the scope of his or her license.~~

43 (g) ~~(f)~~ "Management" means the habilitation of the ~~hearing-~~
44 ~~impaired~~ child with hearing loss.

45 (h) ~~(g)~~ "Newborn" means an age range from birth through 29
46 days.

47 (i) "Physician" means a person licensed under chapter 458
48 to practice medicine or chapter 459 to practice osteopathic
49 medicine.

50 (j) ~~(h)~~ "Screening" means a test or battery of tests
51 administered to determine the need for an in-depth hearing
52 diagnostic evaluation.

53 (3) REQUIREMENTS FOR SCREENING OF NEWBORNS; INSURANCE
54 COVERAGE; REFERRAL FOR ONGOING SERVICES.—

55 (a) Each ~~licensed~~ hospital or other state-licensed birthing
56 facility that provides maternity and newborn care services shall
57 ensure ~~provide~~ that all newborns are, before ~~prior to~~ discharge,
58 screened for the detection of hearing loss, to prevent the
59 consequences of unidentified disorders. If a newborn fails the
60 screening for the detection of hearing loss, the hospital or
61 other state-licensed birthing facility must administer a test
62 approved by the United States Food and Drug Administration or
63 another diagnostically equivalent test on the newborn to screen
64 for congenital cytomegalovirus before the newborn becomes 21
65 days of age or before discharge, whichever occurs earlier.

66 (b) Each licensed birth center that provides maternity and
67 newborn care services shall ensure ~~provide~~ that all newborns
68 are, before ~~prior to~~ discharge, referred to an a- ~~licensed~~



764450

69 audiologist, a physician ~~licensed under chapter 458 or chapter~~
70 ~~459, or a hospital, or another other~~ newborn hearing screening
71 provider, for screening for the detection of hearing loss, to
72 prevent the consequences of unidentified disorders. ~~The referral~~
73 ~~for appointment shall be made within 30 days after discharge.~~
74 Written documentation of the referral must be placed in the
75 newborn's medical chart.

76 (c) If the parent or legal guardian of the newborn objects
77 to the screening, the screening must not be completed. In such
78 case, the physician, midwife, or other person who is attending
79 the newborn shall maintain a record that the screening has not
80 been performed and attach a written objection that must be
81 signed by the parent or guardian.

82 (d) For home births, the health care provider in attendance
83 is responsible for coordination and referral to an a licensed
84 audiologist, a physician, a hospital, or another other newborn
85 hearing screening provider. The referral for appointment must
86 shall be made within 7 30 days after the birth. ~~In cases in~~
87 ~~which the home birth is not attended by a primary health care~~
88 ~~provider, a referral to a licensed audiologist, physician~~
89 ~~licensed pursuant to chapter 458 or chapter 459, hospital, or~~
90 ~~other newborn hearing screening provider must be made by the~~
91 ~~health care provider within the first 3 months after the child's~~
92 ~~birth.~~

93 (e) Licensed health care providers practicing in the
94 primary care setting must ensure that newborns in their care are
95 screened for hearing loss within 21 days after the birth. If a
96 newborn fails the screening for the detection of hearing loss,
97 the licensed health care provider must administer a test



764450

98 approved by the United States Food and Drug Administration or
99 another diagnostically equivalent test on the newborn to screen
100 for congenital cytomegalovirus before the newborn becomes 21
101 days of age.

102 (f) All newborn and infant hearing screenings must ~~shall~~ be
103 conducted by an ~~a licensed~~ audiologist, a physician ~~licensed~~
104 ~~under chapter 458 or chapter 459~~, or an appropriately supervised
105 individual who has completed documented training specifically
106 for newborn hearing screening. Every ~~licensed~~ hospital that
107 provides maternity or newborn care services shall obtain the
108 services of an ~~a licensed~~ audiologist, a physician ~~licensed~~
109 ~~pursuant to chapter 458 or chapter 459~~, or another ~~other~~ newborn
110 hearing screening provider, through employment or contract or
111 written memorandum of understanding, for the purposes of
112 appropriate staff training, screening program supervision,
113 monitoring the scoring and interpretation of test results,
114 rendering of appropriate recommendations, and coordination of
115 appropriate follow-up ~~followup~~ services. Appropriate
116 documentation of the screening completion, results,
117 interpretation, and recommendations must be placed in the
118 medical record within 24 hours after completion of the screening
119 procedure.

120 (g) ~~(f)~~ The screening of a newborn's hearing must ~~should~~ be
121 completed before the newborn is discharged from the hospital.
122 However, if the screening is not completed before discharge due
123 to scheduling or temporary staffing limitations, the screening
124 must be completed within 21 ~~30~~ days after the birth ~~discharge~~.
125 Screenings completed after discharge or performed because of
126 initial screening failure must be completed by an audiologist



764450

127 ~~licensed in the state, a physician licensed under chapter 458 or~~
128 ~~chapter 459, or a hospital, or another other newborn hearing~~
129 ~~screening provider.~~

130 (h)~~(g)~~ Each hospital shall formally designate a lead
131 physician responsible for programmatic oversight for newborn
132 hearing screening. Each birth center shall designate a licensed
133 health care provider to provide such programmatic oversight and
134 to ensure that the appropriate referrals are being completed.

135 (i)~~(h)~~ When ordered by the treating physician, screening of
136 a newborn's hearing must include auditory brainstem responses,
137 or evoked otoacoustic ~~otacoustic~~ emissions, or appropriate
138 technology as approved by the United States Food and Drug
139 Administration.

140 (j)~~(i)~~ The results of any test conducted pursuant to this
141 section, including, but not limited to, newborn hearing loss
142 screening, congenital cytomegalovirus testing, and any related
143 diagnostic testing, must be reported to the department within 7
144 days after receipt of such results ~~Newborn hearing screening~~
145 ~~must be conducted on all newborns in hospitals in this state on~~
146 ~~birth admission. When a newborn is delivered in a facility other~~
147 ~~than a hospital, the parents must be instructed on the~~
148 ~~importance of having the hearing screening performed and must be~~
149 ~~given information to assist them in having the screening~~
150 ~~performed within 3 months after the child's birth.~~

151 (k)~~(j)~~ The initial procedure for screening the hearing of
152 the newborn or infant and any medically necessary follow-up
153 ~~followup~~ reevaluations leading to diagnosis shall be a covered
154 benefit for, ~~reimbursable under Medicaid as an expense~~
155 ~~compensated supplemental to the per diem rate for Medicaid~~



764450

156 ~~patients enrolled in MediPass or~~ Medicaid patients covered by a
157 fee for service program. For Medicaid patients enrolled in HMOs,
158 providers shall be reimbursed directly by the Medicaid Program
159 Office at the Medicaid rate. This service may not be considered
160 a covered service for the purposes of establishing the payment
161 rate for Medicaid HMOs. All health insurance policies and health
162 maintenance organizations as provided under ss. 627.6416,
163 627.6579, and 641.31(30), except for supplemental policies that
164 only provide coverage for specific diseases, hospital indemnity,
165 or Medicare supplement, or to the supplemental polices, shall
166 compensate providers for the covered benefit at the contracted
167 rate. Nonhospital-based providers are ~~shall be~~ eligible to bill
168 Medicaid for the professional and technical component of each
169 procedure code.

170 (1) ~~(*)~~ A child who is diagnosed as having a permanent
171 hearing loss ~~impairment~~ shall be referred to the primary
172 care physician for medical management, treatment, and follow-up
173 ~~followup~~ services. Furthermore, in accordance with Part C of the
174 Individuals with Disabilities Education Act, Pub. L. No. 108-
175 446, Infants and Toddlers with Disabilities, any child from
176 birth to 36 months of age who is diagnosed as having a hearing
177 loss ~~impairment~~ that requires ongoing special hearing services
178 must be referred to the Children's Medical Services Early
179 Intervention Program serving the geographical area in which the
180 child resides.

181 ~~(1) Any person who is not covered through insurance and~~
182 ~~cannot afford the costs for testing shall be given a list of~~
183 ~~newborn hearing screening providers who provide the necessary~~
184 ~~testing free of charge.~~



185 Section 2. This act shall take effect January 1, 2023.

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187 ===== T I T L E A M E N D M E N T =====

188 And the title is amended as follows:

189 Delete everything before the enacting clause

190 and insert:

191 A bill to be entitled

192 An act relating to newborn screenings; amending s.

193 383.145, F.S.; revising and defining terms; requiring

194 hospitals and other state-licensed birthing facilities

195 to test for congenital cytomegalovirus in newborns

196 within a specified timeframe under certain

197 circumstances; revising the timeframe in which health

198 care providers attending home births must make certain

199 referrals; requiring certain health care providers

200 practicing in the primary care setting to screen

201 newborns in their care for hearing loss within a

202 specified timeframe; requiring such providers to test

203 such newborns for congenital cytomegalovirus within a

204 specified timeframe under certain circumstances;

205 revising the timeframe within which hospitals must

206 complete newborn hearing screenings that were not

207 completed before discharge due to temporary staffing

208 or scheduling limitations; providing that certain test

209 results must be reported to the Department of Health

210 within a specified timeframe; deleting a requirement

211 that the parents of certain newborns be instructed on

212 and provided specified information; revising a

213 provision related to Medicaid coverage of newborn



764450

214 hearing screenings and follow-up reevaluations to
215 delete obsolete language; deleting a requirement that
216 certain uninsured persons be provided a list of
217 specified providers; providing an effective date.