SECOND ENGROSSMENT

Fifty-sixth Legislative Assembly of North Dakota

REENGROSSED HOUSE BILL NO. 1478

Introduced by

5

8

9

10

11

12

13

15

16

17

18

19

20

21

22

23

Representatives Jensen, Rose

Senator W. Stenehjem

- 1 A BILL for an Act to create and enact a new section to chapter 25-17 of the North Dakota
- 2 Century Code, relating to newborn infant hearing screening; to amend and reenact section
- 3 25-17-05 of the North Dakota Century Code, relating to testing charges for newborn health
- 4 screening; and to provide an effective date.

BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

- SECTION 1. AMENDMENT. Section 25-17-05 of the North Dakota Century Code is amended and reenacted as follows:
 - **25-17-05. Testing charges.** The state department of health shall adopt rules that establish reasonable fees and may impose those fees to cover the costs of administering tests under this chapter <u>for phenylketonuria</u>, <u>galactosemia</u>, <u>and other metabolic diseases</u>. All fees collected must be deposited in the state department of health operating account.
 - **SECTION 2.** A new section to chapter 25-17 of the North Dakota Century Code is created and enacted as follows:

14 Newborn hearing tests - Duties - Reports.

- 1. The physician, nurse midwife, nurse practitioner, or other individual attending a newborn infant shall have that infant's hearing tested within ninety days of birth. The hearing test required under this section must comply with the protocol prescribed by the state department of health or, if the department has not issued a protocol, must be consistent with the recommendations of the joint committee on infant hearing.
- 2. A physician attending a newborn with a hearing impairment shall report the case to the state department of health on the medical conditions portion of the birth record or on any other form as required by the department. Determination of a hearing

- impairment under this subsection must be established by applying the criteria of
 the joint committee on infant hearing.
 - 3. This section does not apply if a parent of a newborn infant objects to performance of a hearing test on the grounds that testing for impaired hearing conflicts with the parent's religious tenets and practices.
 - 4. The state department of health and the department of human services jointly shall provide information regarding the nature of infant hearing impairment to physicians, hospital staffs, public health nurses, and state residents. Information provided under this subsection may be in the form of a written brochure or other suitable format. The information provided must address an infant's need for early detection of hearing impairment, treatments and devices available to correct hearing impairment and prevent retardation of speech and language development, and government services available to an infant who is not covered by a health plan or whose health plan does not cover treatment or devices to correct infant hearing impairment.
 - 5. As used in this section, joint committee on infant hearing means the national committee composed of representatives from the American academy of audiology, American academy of otolaryngology-head and neck surgery, American academy of pediatrics, American speech-language-hearing association, council for education of the deaf, and directors of speech and hearing programs in state health and welfare departments.
 - **SECTION 3. EFFECTIVE DATE.** This Act becomes effective on January 1, 2000.