Session of 2021

HOUSE BILL No. 2250

By Committee on Appropriations

2-5

AN ACT concerning health and healthcare; relating to newborn screening;
 establishing an advance universal newborn screening program;
 providing for reimbursement of treatment services; authorizing the
 secretary of health and environment to specify conditions included in
 screenings; increasing transfers of moneys to the Kansas newborn
 screening fund; amending K.S.A. 65-181 and 65-183 and K.S.A. 2020
 Supp. 65-180 and repealing the existing sections.

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9 Be it enacted by the Legislature of the State of Kansas:

10 New Section 1. This section and K.S.A. 65-180 through 65-183, and 11 amendments thereto, shall be known and may be cited as the newborn 12 screening act.

Sec. 2. K.S.A. 2020 Supp. 65-180 is hereby amended to read as
follows: 65-180. *There is hereby established an advance universal newborn screening program to be administered by the secretary of health and environment.* The secretary of health and environment shall:

(a) Institute and carry on an intensive educational program among 17 physicians, hospitals, public health nurses and the public concerning 18 19 congenital hypothyroidism, galactosemia, phenylketonuria and other-20 genetic diseases detectable with the same specimen conditions included by 21 the secretary under subsection (i). This educational program shall include 22 information about the nature of such conditions and examinations for the 23 detection thereof in early infancy in order that measures may be taken to prevent intellectual disability or morbidity resulting from such conditions. 24

25 (b) Provide recognized screening tests for-phenylketonuria, 26 galactosemia, hypothyroidism and such other diseases as may be-27 appropriately detected with the same specimen conditions included by the 28 secretary under subsection (i). The initial laboratory screening tests for 29 these diseases shall be performed by the department of health and 30 environment or its designee for all infants born in the state. Such services 31 shall be performed without charge.

(c) Provide a follow-up program by providing test results and other information to identified physicians; locate infants with abnormal newborn screening test results; with parental consent, monitor infants to assure appropriate testing to either confirm or not confirm the disease suggested by the screening test results; with parental consent, monitor therapy and

with confirmed diagnosis of congenital 1 treatment for infants 2 hypothyroidism, galactosemia, phenylketonuria or other genetic diseases 3 being screened under this statute conditions included by the secretary 4 under subsection (i); and establish ongoing education and support activities for individuals with confirmed diagnosis of congenital 5 6 hypothyroidism, galactosemia, phenylketonuria and other genetic diseases 7 being screened under this statute such conditions and for the families of 8 such individuals

9 (d) Maintain a registry of cases including information of importance 10 for the purpose of follow-up-services to-prevent intellectual support early 11 diagnosis, treatment and services for healthy development or the 12 prevention of disability or morbidity.

(e) Provide, within the limits of appropriations available therefor, the 13 necessary treatment product for diagnosed-cases conditions included by 14 the secretary under subsection (i) for as long as medically indicated, when 15 the product is not available through other state agencies. In addition to 16 17 diagnosed cases under this section, diagnosed cases of maple syrup urine disease shall be included as a diagnosed case under this subsection. Where 18 19 If the applicable income of the person or persons who have legal 20 responsibility for the diagnosed individual meets medicaid eligibility, such 21 individuals' needs shall be covered under the medicaid state plan. Where If 22 the applicable income of the person or persons who have legal 23 responsibility for the diagnosed individual is not medicaid eligible, but is 24 below 300% of the federal poverty level established under the most recent 25 poverty guidelines issued by the United States department of health and 26 human services, the department of health and environment shall provide 27 reimbursement of between 50% to 100% of the product cost in accordance 28 with rules and regulations adopted by the secretary of health and 29 environment. Where If the applicable income of the person or persons who have legal responsibility for the diagnosed individual exceeds 300% of the 30 31 federal poverty level established under the most recent poverty guidelines 32 issued by the United States department of health and human services, the 33 department of health and environment shall provide reimbursement of an 34 amount not to exceed 50% of the product cost in accordance with rules and 35 regulations adopted by the secretary of health and environment.

(f) Provide state assistance to an applicant pursuant to subsection (e) only after it has been shown that the applicant has exhausted all benefits from private third-party payers, medicare, medicaid and other government assistance programs and after consideration of the applicant's income and assets. The secretary of health and environment shall adopt rules and regulations establishing standards for determining eligibility for state assistance under this section.

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(g) (1) Except for treatment products provided under subsection (e), if

1 the medically necessary food treatment product for diagnosed-cases-2 conditions included by the secretary under subsection (i) must be purchased, the purchaser shall be reimbursed by the department of health 3 and environment for costs incurred up to \$1,500 per year per diagnosed 4 5 child age 18 or younger at 100% of the product cost upon submission of a 6 receipt of purchase identifying the company from which the product was 7 purchased. For a purchaser to be eligible for reimbursement under this-8 subsection, the applicable income of the person or persons who have legal 9 responsibility for the diagnosed child shall not exceed 300% of the poverty level established under the most recent poverty guidelines issued by the 10 federal department of health and human services in accordance with rules 11 12 and regulations adopted by the secretary of health and environment.

(2) As an option to reimbursement authorized under-subsection (g) 13 paragraph (1), the department of health and environment may purchase 14 medically necessary food treatment products for distribution to-diagnosed 15 16 ehildren in an amount not to exceed \$1,500 per year per diagnosed child 17 age 18 or younger. For a diagnosed child to be eligible for the distribution 18 of food treatment products under this subsection, the applicable income of 19 the person or persons who have legal responsibility for the diagnosed child 20 shall not exceed 300% of the poverty level established under the most-21 recent poverty guidelines issued by the federal department of health and 22 human services individuals with diagnosed conditions included by the 23 secretary under subsection (i).

24 (3) In addition to diagnosed cases under this section, diagnosed cases
 25 of maple syrup urine disease shall be included as a diagnosed case under
 26 this subsection.

27 (h) The department of health and environment shall continue to 28 receive orders for both *medically* necessary treatment products and 29 *medically* necessary food treatment products, purchase such products, and shall deliver the products to an address prescribed by the diagnosed 30 31 individual. The department of health and environment shall bill the person or persons who have legal responsibility for the diagnosed patient-32 33 individual for a pro-rata share of the total costs, in accordance with the 34 rules and regulations adopted pursuant to this section.

35 (i) The secretary of health and environment shall adopt rules and 36 regulations as needed to require, to the extent of available funding, 37 newborn screening tests to screen for treatable-disorders conditions. The 38 secretary shall determine the conditions to be included in the newborn 39 screening tests, including, but not limited to, conditions listed in the-core 40 recommended uniform screening panel-of newborn screening conditions recommended in the 2005 report by the American college of medical-41 genetics entitled "Newborn Screening: Toward a Uniform Screening Panel 42 43 and System" or another report recommended by the United States

secretary of health and human services as determined by the department
 of health and environment to provide more appropriate newborn screening
 guidelines to protect the health and welfare of newborns for treatable
 disorders conditions.

5 (j) In performing the duties under subsection (i), the secretary of 6 health and environment shall appoint an advisory council to advise the 7 department of health and environment on implementation of subsection (i).

8 (k) The department of health and environment shall periodically 9 review the newborn screening program to determine the efficacy and cost 10 effectiveness of the program and determine whether adjustments to the 11 program are necessary to protect the health and welfare of newborns and 12 to maximize the number of newborn screenings that may be conducted 13 with the funding available for the screening program.

(1) There is hereby established in the state treasury the Kansas 14 newborn screening fund that shall be administered by the secretary of 15 16 health and environment. All expenditures from the fund shall be for the 17 newborn screening program. All expenditures from the fund shall be made 18 in accordance with appropriation acts upon warrants of the director of 19 accounts and reports issued pursuant to vouchers approved by the 20 secretary of health and environment or the secretary's designee. On July 1 21 of each year, the director of accounts and reports shall determine the 22 amount credited to the medical assistance fee fund pursuant to K.S.A. 40-23 3213, and amendments thereto, and shall transfer the estimated portion of such amount that is necessary to fund the newborn screening program for 24 25 the ensuing fiscal year as certified by the secretary of health and environment or the secretary's designee to the Kansas newborn screening 26 fund. Such amount shall not exceed \$2,500,000 \$5,000,000 in any one 27 28 fiscal year, except that such amount shall not exceed \$5,000,000 in fiscal 29 year 2021.

30 Sec. 3. K.S.A. 65-181 is hereby amended to read as follows: 65-181. 31 The administrative officer or other person in charge of each institution or 32 the attending physician, caring for infants 28 days of age or younger shall have administered to every such infant or child in-its or such institution's 33 or physician's care, tests for congenital hypothyroidism, galactosemia, 34 phenylketonuria and other genetic diseases which may be detected with-35 the same specimen conditions included by the secretary of health and 36 37 environment under K.S.A. 65-180(i), and amendments thereto, in 38 accordance with rules and regulations adopted by the secretary of health 39 and environment

40 Sec. 4. K.S.A. 65-183 is hereby amended to read as follows: 65-183.
41 Every physician having knowledge of a case of <u>congenital</u>
42 hypothyroidism, galactosemia or phenylketonuria and other genetic43 diseases as may be detected with tests given pursuant to this act a

- 1 condition included by the secretary of health and environment under
- 2 K.S.A. 65-180(i), and amendments thereto, in one of such physician's own
- patients shall report the case to the secretary of health and environment onforms provided by the secretary.
- 5 Sec. 5. K.S.A. 65-181 and 65-183 and K.S.A. 2020 Supp. 65-180 are 6 hereby repealed.
- 7 Sec. 6. This act shall take effect and be in force from and after its 8 publication in the Kansas register.