

Enrolled House Bill 2754

Sponsored by Representative BARKER

CHAPTER

AN ACT

Relating to cytomegalovirus; creating new provisions; and amending ORS 433.321.

Be It Enacted by the People of the State of Oregon:

SECTION 1. ORS 433.321 is amended to read:

433.321. (1) In all Oregon hospitals and birthing centers *[with]* **where** more than 200 live births **occur** per year, each newborn child *[shall]* **must** receive a newborn hearing screening test *[within one month of the date of birth]*. A hospital or birthing center shall attempt to conduct the test required under this subsection prior to the discharge of the **newborn** child from the facility.

(2) All Oregon hospitals and birthing centers *[with]* **where** fewer than 200 live births **occur** per year shall provide the parent or guardian of a newborn child with the appropriate information furnished by the Oregon Health Authority concerning the importance of newborn hearing screening tests.

(3) All Oregon hospitals and birthing centers conducting newborn hearing screening tests *[shall]*, within 10 days of *[the]* **conducting a newborn hearing screening test, shall:**

(a) Notify the parent or guardian and the health care provider *[for]* of the newborn child of the test results;

(b) *[With the results of the test,]* Provide **the parent or guardian with** names and contact information for diagnostic facilities **that conduct newborn hearing screening tests** in the community **and with materials developed pursuant to section 2 of this 2017 Act;** and

(c) Report to the authority the results of the test for the newborn child and information identifying the newborn child.

(4) A diagnostic facility conducting newborn hearing **screening** tests *[shall report]*, within 10 days of *[the]* **conducting a newborn hearing screening test, shall report** to the authority the results of the test for the newborn child and information identifying the newborn child. **If a diagnostic facility conducting newborn hearing screening tests detects hearing loss in a newborn child, the diagnostic facility shall provide to the parent or guardian materials developed pursuant to section 2 of this 2017 Act.**

(5) Each public and private educational institution that provides early intervention services as defined in ORS 343.035 shall disclose to the authority information identifying the children referred to the educational institution with diagnosed hearing loss and the enrollment status of the children. The institution may disclose to the authority additional information regarding children with hearing loss who are receiving early intervention services if the educational institution has obtained consent to disclose the information.

(6) The authority, in collaboration with the Child Development and Rehabilitation Center of the Oregon Health and Science University, shall, on an annual basis, provide to all Oregon hospitals and birthing centers the following information:

(a) A description of the responsibilities created by this section;

(b) A list of appropriate screening devices and descriptions of training protocols to ensure that staff members are adequately trained in the use of **hearing** screening equipment;

(c) A list of [*newborn hearing screening testing and*] diagnostic facilities **that conduct newborn hearing screening tests;**

(d) **Using evidence-based best practice standards, a recommended schedule for conducting newborn hearing screening tests, and for referring parents and guardians to health care providers for the purpose of diagnosing whether the newborn child has congenital cytomegalovirus, within 21 days of the newborn child's date of birth;**

[(d)] (e) A list of public and private educational institutions that provide early intervention services and a description of the geographic area served by each institution; and

[(e)] (f) Other information related to newborn hearing screening tests that the authority deems appropriate.

(7) A hospital or birthing center [*directed to provide newborn hearing screening tests under this section*] **described in subsection (1) of this section** is exempt from providing [*such services*] **newborn hearing screening tests** if the parent or guardian of the newborn child objects to the testing procedure on the grounds that the procedure conflicts with the religious tenets and practices of the parent or guardian. The parent or guardian must sign a statement that the newborn [*infant*] **child** is being [*so*] reared **in accordance with those religious tenets and practices.**

(8) [*No*] **A** newborn child may **not** be refused the procedure described in subsection (1) of this section because of an inability of the parent or guardian to pay for the procedure.

SECTION 2. (1) The Oregon Health Authority shall compile information on the following:

(a) The transmission of congenital cytomegalovirus;

(b) The signs and symptoms of and methods of diagnosing congenital cytomegalovirus;

(c) The potential complications associated with congenital cytomegalovirus; and

(d) Treating and managing congenital cytomegalovirus.

(2) The authority shall disseminate the information described in subsection (1) of this section to hospitals, birthing centers, diagnostic facilities that conduct newborn hearing screening tests, health care providers and the public. The authority must disseminate the information through print publications. The authority also may disseminate the information through electronic publications, video productions or any other method determined to be cost-effective by the authority.

Passed by House April 20, 2017

Repassed by House June 13, 2017

.....
Timothy G. Sekerak, Chief Clerk of House

.....
Tina Kotek, Speaker of House

Passed by Senate June 8, 2017

.....
Peter Courtney, President of Senate

Received by Governor:

.....M.,....., 2017

Approved:

.....M.,....., 2017

.....
Kate Brown, Governor

Filed in Office of Secretary of State:

.....M.,....., 2017

.....
Dennis Richardson, Secretary of State