SENATE
STATE OF MINNESOTA
EIGHTY-EIGHTH LEGISLATURE
S.F. No. 473

(SENATE AUTHORS: SIEBEN, Sheran, Lourey, Rosen and Nelson)

DATE	D-PG	OFFICIAL STATUS
02/14/2013	234	Introduction and first reading Referred to Health, Human Services and Housing
03/20/2013	1254a	Comm report: To pass as amended and re-refer to Judiciary
04/02/2013	1528	Comm report: To pass and re-referred to Finance

A bill for an act

relating to health; requiring screening of newborns for critical congenital heart disease; proposing coding for new law in Minnesota Statutes, chapter 144.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

Section 1. **[144.1251] NEWBORN SCREENING FOR CRITICAL CONGENITAL HEART DISEASE (CCHD).**

Subdivision 1. **Required testing and reporting.** Each licensed hospital or state-licensed birthing center or facility that provides maternity and newborn care services shall provide screening for congenital heart disease to all newborns prior to discharge using pulse oximetry screening. The screening must occur after the infant is 24 hours old, before discharge from the nursery. If discharge occurs before the infant is 24 hours old, the screening must occur as close as possible to the time of discharge. Results of the screening must be reported to the Department of Health.

For premature infants (less than 36 weeks of gestation) and infants admitted to a higher-level nursery (special care or intensive care), pulse oximetry must be performed when medically appropriate prior to discharge.

Subd. 2. **Implementation.** The Department of Health shall:

(1) communicate the screening protocol requirements;

(2) make information and forms available to the hospitals, birthing centers, and other facilities that are required to provide the screening, health care providers who provide prenatal care and care to newborns, and expectant parents and parents of newborns. The information and forms must include screening protocol and reporting requirements and parental options;

(3) provide training to ensure compliance with and appropriate implementation of the screening;

(4) establish the mechanism for the required data collection and reporting of screening and follow-up diagnostic results to the Department of Health according to the Department of Health's recommendations;

(5) coordinate the implementation of universal standardized screening;

(6) act as a resource for providers as the screening program is implemented, and in consultation with the Advisory Committee on Heritable and Congenital Disorders, develop and implement policies for early medical and developmental intervention services and long-term follow-up services for children and their families identified with a CCHD; and

(7) comply with sections 144.125 to 144.128.