

## **BILL ANALYSIS**

Senate Research Center

S.B. 983  
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Health & Human Services  
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As Filed

### **AUTHOR'S / SPONSOR'S STATEMENT OF INTENT**

Currently, parents of children born with sickle cell trait are not notified of their child's condition. Those children become sickle cell trait carriers who may possibly conceive a child with other sickle cell trait carriers and unknowingly pass on the sickle cell trait to another generation of children. No law requires the notification of parents whose children carry the sickle cell trait.

As proposed, S.B. 983 adds screening for sickle cell trait to the screening tests required for newborns, requires notification of certain persons of certain test results related to sickle cell trait, and authorizes DSHS to provide access to certain services and programs for children with special health care needs.

### **RULEMAKING AUTHORITY**

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

### **SECTION BY SECTION ANALYSIS**

[While the statutory reference in this bill is to the Texas Department of Health (TDH), the following amendments affect the Department of State Health Services (DSHS) as the successor agency to TDH.]

SECTION 1. Amends the heading to Chapter 33, Health and Safety Code, to read as follows:

CHAPTER 33. PHENYLKETONURIA, OTHER HERITABLE DISEASES,  
HYPOTHYROIDISM, AND CERTAIN OTHER DISORDERS OR TRAITS

SECTION 2. Amends Section 33.002(a) and (c), Health and Safety Code, as follows:

(a) Includes other disorders for which screening is required by the Texas Department of Health (TDH) and sickle cell trait among the diseases and disorders for which TDH is required to carry out a program to combat, morbidity and mortality.

(c) Makes conforming changes.

SECTION 3. Amends Section 33.011(a), Health and Safety Code, to include screening for sickle cell trait among the screening tests approved by TDH which a physician attending a newborn child or the person attending the delivery of a newborn child that is not attended by a physician is required to perform.

SECTION 4. Amends Section 33.014, Health and Safety Code, to require TDH, if, because of an analysis of a specimen submitted under Section 33.011, it reasonably suspects that a newborn child may have sickle cell trait, to notify the person who submits the specimen that the results are abnormal and provide the test results to that person. Authorizes TDH to notify certain persons or entities.

SECTION 5. Amends Section 33.031, Health and Safety Code, to authorize the referral to TDH's services program for children with special health care needs, of all newborn children and other individuals under 21 years of age who have been screened, have been found to be

presumptively positive through the newborn screening program for sickle cell trait, and who may be financially eligible.

SECTION 6. Amends Section 33.032(a), Health and Safety Code, to authorize TDH, within the limits of funds available for this purpose and in cooperation with the individual's physician, to provide services directly or through approved providers to individuals of any age who meet certain eligibility criteria on the confirmation of a positive test for sickle cell trait.

SECTION 7. Requires the Department of State Health Services to implement the changes in law made by this Act to the newborn screening program under Chapter 33, Health and Safety Code as soon as practicable after the effective date of this Act.

SECTION 8. Effective date: September 1, 2007.