

**SENATE**  
**STATE OF MINNESOTA**  
**EIGHTY-EIGHTH LEGISLATURE**

**S.F. No. 1074**

(SENATE AUTHORS: EKEN)

DATE	D-PG	OFFICIAL STATUS
03/05/2013	573	Introduction and first reading Referred to Finance

A bill for an act

1.1 relating to health; increasing a fee for newborn screening; appropriating money  
 1.2 for support services for families who have a child who is deaf or has a hearing loss;  
 1.3 adjusting the hospital payment rate; amending Minnesota Statutes 2012, sections  
 1.4 144.125, subdivision 1; 144.966, subdivision 3a; 256.969, subdivision 29.  
 1.5

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

1.7 Section 1. Minnesota Statutes 2012, section 144.125, subdivision 1, is amended to read:

1.8 Subdivision 1. **Duty to perform testing.** It is the duty of (1) the administrative  
 1.9 officer or other person in charge of each institution caring for infants 28 days or less of age,  
 1.10 (2) the person required in pursuance of the provisions of section 144.215, to register the  
 1.11 birth of a child, or (3) the nurse midwife or midwife in attendance at the birth, to arrange  
 1.12 to have administered to every infant or child in its care tests for heritable and congenital  
 1.13 disorders according to subdivision 2 and rules prescribed by the state commissioner of  
 1.14 health. Testing and the recording and reporting of test results shall be performed at the  
 1.15 times and in the manner prescribed by the commissioner of health. ~~The commissioner~~  
 1.16 ~~shall charge a fee so that the total of fees collected will approximate the costs of~~  
 1.17 ~~conducting the tests and implementing and maintaining a system to follow-up infants with~~  
 1.18 ~~heritable or congenital disorders, including hearing loss detected through the early hearing~~  
 1.19 ~~detection and intervention program under section 144.966. The fee to support the newborn~~  
 1.20 screening program including tests administered under this section and section 144.966 is  
 1.21 \$101 \$116 per specimen. Effective July 1, 2010, the fee shall be increased to \$106 per  
 1.22 specimen. The increased fee amount shall be deposited in the general fund. Of the total  
 1.23 fee amount, \$15 shall be deposited in the general fund to offset the cost of the support  
 1.24 services provided under section 144.966, subdivision 3a. The remaining fee amount shall  
 1.25 be deposited in the state treasury and credited to the state government special revenue

2.1 fund. Costs associated with capital expenditures and the development of new procedures  
2.2 may be prorated over a three-year period when calculating the amount of the fees.

2.3 **EFFECTIVE DATE.** This section is effective July 1, 2013.

2.4 Sec. 2. Minnesota Statutes 2012, section 144.966, subdivision 3a, is amended to read:

2.5 Subd. 3a. **Support services to families.** The commissioner shall contract with a  
2.6 nonprofit organization to provide support and assistance to families with children who are  
2.7 deaf or have a hearing loss. The family support provided must include:

2.8 (1) direct hearing loss specific parent-to-parent assistance and unbiased information  
2.9 on communication, educational, and medical options, preferably provided by a program  
2.10 that is part of a national organization; and

2.11 (2) individualized deaf or hard of hearing mentors who provide education, including  
2.12 instruction in American Sign Language.

2.13 The commissioner shall give preference to a nonprofit organization that has the ability to  
2.14 provide these services throughout the state.

2.15 Sec. 3. Minnesota Statutes 2012, section 256.969, subdivision 29, is amended to read:

2.16 Subd. 29. **Reimbursement for the fee increase for the early hearing detection**  
2.17 **and intervention program.** (a) For admissions occurring on or after July 1, 2010,  
2.18 payment rates shall be adjusted to include the increase to the fee that is effective on July 1,  
2.19 2010, for the early hearing detection and intervention program recipients under section  
2.20 144.125, subdivision 1, that is paid by the hospital for public program recipients. This  
2.21 payment increase shall be in effect until the increase is fully recognized in the base year  
2.22 cost under subdivision 2b. This payment shall be included in payments to contracted  
2.23 managed care organizations.

2.24 (b) For admissions occurring on or after July 1, 2013, payment rates shall be  
2.25 adjusted to include the increase to the fee that is effective July 1, 2013, for the early  
2.26 hearing detection and intervention program recipients under section 144.125, subdivision  
2.27 1, that is paid by the hospital for public program recipients. This payment increase shall  
2.28 be in effect until the increase is fully recognized in the base year cost under subdivision  
2.29 2b. This payment shall be included in payments to contracted managed care organizations.

2.30 Sec. 4. **APPROPRIATIONS.**

2.31 (a) \$...... in fiscal year 2014 and \$...... in fiscal year 2015 are appropriated from the  
2.32 general fund to the commissioner of health for the purpose of providing support services

3.1 to families as required under Minnesota Statutes, section 144.966, subdivision 3a. \$.....  
3.2 of the appropriation in each fiscal year may be used by the commissioner of health for  
3.3 administrative costs associated with this program.

3.4 (b) \$..... in fiscal year 2014 and \$..... in fiscal year 2015 are appropriated from  
3.5 the general fund to the commissioner of health for home-based education in American  
3.6 Sign Language for families with children who are deaf or have hearing loss, as required  
3.7 under Minnesota Statutes, section 144.966, subdivision 3a. \$..... of the appropriation  
3.8 in each fiscal year may be used by the commissioner of health for administrative costs  
3.9 associated with this program.

3.10 (c) \$..... is appropriated in fiscal year 2014 from the general fund to the  
3.11 commissioner of human services for the hospital reimbursement increase in section 3.