## SB0060S01 compared with SB0060

{Omitted text} shows text that was in SB0060 but was omitted in SB0060S01 inserted text shows text that was not in SB0060 but was inserted into SB0060S01

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	<b>Newborn Testing Amendments</b>
	2025 GENERAL SESSION
	STATE OF UTAH
	Chief Sponsor: David P. Hinkins
	House Sponsor:
	LONG TITLE
	General Description:
	This bill amends provisions related to newborn screening.
	Highlighted Provisions:
	This bill:
	requires the Department of Health and Human Services to screen newborns for pyruvate
Ċ	lehydrogenase complex deficiency; {and}
	<ul> <li>amends provisions related to hearing loss testing; and</li> </ul>
	makes technical changes.
	Money Appropriated in this Bill:
	None
	None
	AMENDS:
	26B-4-319, as renumbered and amended by Laws of Utah 2023, Chapter 307, as renumbered and
	amended by Laws of Utah 2023, Chapter 307

## SB0060 compared with SB0060S01

- 20 Be it enacted by the Legislature of the state of Utah:
- Section 1. Section **26B-4-319** is amended to read:
- 22 **26B-4-319.** Testing of newborn infants.
- 22 (1) Except in the case where parents object on the grounds that they are members of a specified, well-recognized religious organization whose teachings are contrary to the tests required by this section, a newborn infant shall be tested for:
- 25 (a) phenylketonuria (PKU);
- 26 (b) pyruvate dehydrogenase complex deficiency (PDCD) { ; } if there is:
- 28 (i) a preventative measure or treatment available; and
- 29 (ii) a reliable laboratory diagnostic test method;
- 27 [(b)] (c) other heritable disorders which may result in an intellectual or physical disability or death and for which:
- 29 (i) a preventive measure or treatment is available; and
- 30 (ii) there exists a reliable laboratory diagnostic test method;
- 31 (d) hearing loss {if the infant was born in any setting, including a hospital, where 100 or more live births occur annually}; and
- 33 [<del>(c)</del>
  - (i) an infant born in a hospital with 100 or more live births annually, hearing loss; and
- 35 [(ii) an infant born in a setting other than a hospital with 100 or more live births annually, hearing loss; and]
- 37 [(d)] (e) critical congenital heart defects using pulse oximetry.
- 38 (2) In accordance with Section 26B-1-209, the department may charge fees for:
- 39 (a) materials supplied by the department to conduct tests required under Subsection (1);
- 40 (b) tests required under Subsection (1) conducted by the department;
- 41 (c) laboratory analyses by the department of tests conducted under Subsection (1); and
- 42 (d) the administrative cost of follow-up contacts with the parents or guardians of tested infants.
- 44 (3) Tests for hearing loss described in Subsection (1) shall be based on one or more methods approved by the Newborn Hearing Screening Committee created in Section 26B-1-432, including:
- 47 (a) auditory brainstem response;
- 48 (b) automated auditory brainstem response; and
- 49 (c) evoked otoacoustic emissions.

## SB0060 compared with SB0060S01

- 50 (4) Results of tests for hearing loss described in Subsection (1) shall be reported to:
- 51 (a) the department; and
- 52 (b) when results of tests for hearing loss under Subsection (1) suggest that additional diagnostic procedures or medical interventions are necessary:
- 54 (i) a parent or guardian of the infant;
- 55 (ii) an early intervention program administered by the department in accordance with Part C of the Individuals with Disabilities Education Act, 20 U.S.C. Sec. 1431 et seq.; and
- 58 (iii) the Utah Schools for the Deaf and the Blind, created in Section 53E-8-201.
- 61 Section 2. **Effective date.**

This bill takes effect on May 7, 2025.

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