

HB 1315 -- NEWBORN SCREENING REQUIREMENTS

SPONSOR: Roeber

COMMITTEE ACTION: Voted "Do Pass" by the Standing Committee on Health and Mental Health Policy by a vote of 11 to 0. Voted "Do Pass" by the Select Committee on Social Services by a vote of 10 to 0.

This bill requires the Department of Health and Senior Services, subject to appropriations, to add severe combined immunodeficiency (SCID), also known as the bubble boy disease to the list of newborn screening requirements.

PROPONENTS: Supporters say that the bill expands newborn screening to include SCID, which is the absence of an immune system that causes infants to obtain recurrent, opportunistic infections. There is a 95% cure rate for SCID if it is treated right after birth, within one month, with stem cells before passive immunity received from the infant's mother wears off. Twenty-eight states currently test for SCID as part of their newborn screening programs. The Centers for Disease Control and Prevention (CDC) and the federal Department of Health and Human Services supports newborn screening for SCID. There is no cost to General Revenue in the fiscal note, but there is a cost to the Missouri Physical Health Fund. The addition of screening for SCID would increase the cost of newborn screening by \$7 to \$9 per child.

Testifying for the bill were Representative Roeber; Christie Eads; and Kimberly Gaulter.

OPPONENTS: There was no opposition voiced to the committee.