

1-1 By: Kolkhorst S.B. No. 791
1-2 (In the Senate - Filed February 25, 2015; March 2, 2015,
1-3 read first time and referred to Committee on Health and Human
1-4 Services; March 30, 2015, reported adversely, with favorable
1-5 Committee Substitute by the following vote: Yeas 9, Nays 0;
1-6 March 30, 2015, sent to printer.)

1-7 COMMITTEE VOTE

	Yea	Nay	Absent	PNV
1-8				
1-9	<u>X</u>			
1-10	<u>X</u>			
1-11	<u>X</u>			
1-12	<u>X</u>			
1-13	<u>X</u>			
1-14	<u>X</u>			
1-15	<u>X</u>			
1-16	<u>X</u>			
1-17	<u>X</u>			

1-18 COMMITTEE SUBSTITUTE FOR S.B. No. 791 By: Zaffirini

1-19 A BILL TO BE ENTITLED
1-20 AN ACT

1-21 relating to testing for and education about congenital
1-22 cytomegalovirus in infants.

1-23 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

1-24 SECTION 1. This Act shall be known as the Madeline Leigh
1-25 Armstrong Act.

1-26 SECTION 2. Subtitle B, Title 2, Health and Safety Code, is
1-27 amended by adding Chapter 46 to read as follows:

1-28 CHAPTER 46. CONGENITAL CYTOMEGALOVIRUS

1-29 Sec. 46.001. DEFINITIONS. In this chapter:

1-30 (1) "Congenital cytomegalovirus" means
1-31 cytomegalovirus acquired by an infant before birth.

1-32 (2) "Department" means the Department of State Health
1-33 Services.

1-34 Sec. 46.002. EDUCATIONAL MATERIALS ON CONGENITAL
1-35 CYTOMEGALOVIRUS. (a) The department, in consultation with the
1-36 Texas Medical Board, shall develop and publish informational
1-37 materials for women who may become pregnant, expectant parents, and
1-38 parents of infants regarding:

1-39 (1) the incidence of cytomegalovirus;

1-40 (2) the transmission of cytomegalovirus to pregnant
1-41 women and women who may become pregnant;

1-42 (3) birth defects caused by congenital
1-43 cytomegalovirus;

1-44 (4) methods of diagnosing congenital cytomegalovirus;

1-45 (5) available preventive measures to avoid the
1-46 infection of women who are pregnant or may become pregnant; and

1-47 (6) treatment options available for children born with
1-48 congenital cytomegalovirus.

1-49 (b) The materials must be published in:

1-50 (1) English and Spanish;

1-51 (2) an easily comprehensible form; and

1-52 (3) a typeface large enough to be clearly legible.

1-53 (c) The department shall periodically review the materials
1-54 to determine if changes to the contents of the materials are
1-55 necessary.

1-56 Sec. 46.003. PUBLICATION OF MATERIALS. (a) The department
1-57 shall publish the information required to be published under this
1-58 chapter on the department's Internet website.

1-59 (b) The department may not charge a fee for physical copies
1-60 of the materials. The department shall provide appropriate

2-1 quantities of the materials to any person on request.

2-2 Sec. 46.004. EDUCATION AND OUTREACH. (a) The department
2-3 shall establish an outreach program to:

2-4 (1) educate women who may become pregnant, expectant
2-5 parents, and parents of infants about cytomegalovirus; and

2-6 (2) raise awareness of cytomegalovirus among health
2-7 care providers who provide care to expectant mothers or infants.

2-8 (b) The department may solicit and accept the assistance of
2-9 any relevant medical associations or community resources,
2-10 including faith-based resources, to promote education about
2-11 cytomegalovirus under this chapter.

2-12 Sec. 46.005. RULES. The executive commissioner of the
2-13 Health and Human Services Commission may adopt rules for the
2-14 implementation of this chapter.

2-15 SECTION 3. Chapter 47, Health and Safety Code, is amended by
2-16 adding Section 47.0032 to read as follows:

2-17 Sec. 47.0032. TESTING FOR CYTOMEGALOVIRUS. (a) If an
2-18 infant does not pass the newborn hearing screening under Section
2-19 47.003, the birthing facility shall perform or cause to be
2-20 performed a test for cytomegalovirus on the infant, unless the
2-21 parent declines the test.

2-22 (b) If an infant tests positive for cytomegalovirus, the
2-23 birthing facility shall provide the infant's parents with:

2-24 (1) the results of the test;

2-25 (2) information on the potential effects of
2-26 cytomegalovirus and the treatment options available; and

2-27 (3) information that directs parents to coordinate
2-28 follow-up care with the infant's physician or health care provider.

2-29 SECTION 4. Section 161.501(a), Health and Safety Code, is
2-30 amended to read as follows:

2-31 (a) A hospital, birthing center, physician, nurse midwife,
2-32 or midwife who provides prenatal care to a pregnant woman during
2-33 gestation or at delivery of an infant shall:

2-34 (1) provide the woman and the father of the infant, if
2-35 possible, or another adult caregiver for the infant, with a
2-36 resource pamphlet that includes:

2-37 (A) a list of the names, addresses, and phone
2-38 numbers of professional organizations that provide postpartum
2-39 counseling and assistance to parents relating to postpartum
2-40 depression and other emotional trauma associated with pregnancy and
2-41 parenting;

2-42 (B) information regarding the prevention of
2-43 shaken baby syndrome including:

2-44 (i) techniques for coping with anger caused
2-45 by a crying baby;

2-46 (ii) different methods for preventing a
2-47 person from shaking a newborn, infant, or other young child;

2-48 (iii) the dangerous effects of shaking a
2-49 newborn, infant, or other young child; and

2-50 (iv) the symptoms of shaken baby syndrome
2-51 and who to contact, as recommended by the American Academy of
2-52 Pediatrics, if a parent suspects or knows that a baby has been
2-53 shaken in order to receive prompt medical treatment;

2-54 (C) a list of diseases for which a child is
2-55 required by state law to be immunized and the appropriate schedule
2-56 for the administration of those immunizations;

2-57 (D) the appropriate schedule for follow-up
2-58 procedures for newborn screening;

2-59 (E) information regarding sudden infant death
2-60 syndrome, including current recommendations for infant sleeping
2-61 conditions to lower the risk of sudden infant death syndrome; and

2-62 (F) educational information in both English and
2-63 Spanish on:

2-64 (i) pertussis disease and the availability
2-65 of a vaccine to protect against pertussis, including information on
2-66 the Centers for Disease Control recommendation that parents receive
2-67 Tdap during the postpartum period to protect newborns from the
2-68 transmission of pertussis; and

2-69 (ii) the incidence of cytomegalovirus,

3-1 methods of diagnosing congenital cytomegalovirus, birth defects
3-2 caused by congenital cytomegalovirus, and available methods of
3-3 treatment for an infant born with congenital cytomegalovirus;

3-4 (2) if the woman is a recipient of medical assistance
3-5 under Chapter 32, Human Resources Code, provide the woman and the
3-6 father of the infant, if possible, or another adult caregiver with a
3-7 resource guide that includes information in both English and
3-8 Spanish relating to the development, health, and safety of a child
3-9 from birth until age five, including information relating to:

3-10 (A) selecting and interacting with a primary
3-11 health care practitioner and establishing a "medical home" for the
3-12 child;

3-13 (B) dental care;

3-14 (C) effective parenting;

3-15 (D) child safety;

3-16 (E) the importance of reading to a child;

3-17 (F) expected developmental milestones;

3-18 (G) health care resources available in the state;

3-19 (H) selecting appropriate child care; and

3-20 (I) other resources available in the state;

3-21 (3) document in the woman's record that the woman
3-22 received the resource pamphlet described in Subdivision (1) and the
3-23 resource guide described in Subdivision (2), if applicable; and

3-24 (4) retain the documentation for at least five years
3-25 in the hospital's, birthing center's, physician's, nurse midwife's,
3-26 or midwife's records.

3-27 SECTION 5. (a) The Department of State Health Services
3-28 shall develop and publish the materials required by Chapter 46,
3-29 Health and Safety Code, as added by this Act, not later than January
3-30 1, 2016.

3-31 (b) The change in law made by Section 47.0032, Health and
3-32 Safety Code, as added by this Act, applies only to a hearing
3-33 screening performed on or after the effective date of this Act.

3-34 (c) The Department of State Health Services shall revise the
3-35 pamphlet under Section 161.501(a), Health and Safety Code, as
3-36 amended by this Act, not later than January 1, 2016.

3-37 SECTION 6. This Act takes effect September 1, 2015.

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