Union Calendar No. 352 H.R. 3825

110th CONGRESS 2d Session

[Report No. 110-570]

To amend the Public Health Service Act to establish grant programs to provide for education and outreach on newborn screening and coordinated followup care once newborn screening has been conducted, to reauthorize programs under part A of title XI of such Act, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

October 15, 2007

Ms. ROYBAL-ALLARD (for herself, Mr. SIMPSON, Mr. REYNOLDS, and Mr. WAXMAN) introduced the following bill; which was referred to the Committee on Energy and Commerce

April 8, 2008

Additional sponsors: Mrs. McCarthy of New York, Ms. Baldwin, Mr. Rush, Ms. Matsui, Mr. Rothman, Ms. Eshoo, Mr. Pearce, Mr. Towns, Mr. RAMSTAD, Mr. SCHIFF, Ms. SCHAKOWSKY, Mr. SPRATT, Mr. FATTAH, Mr. GORDON of Tennessee, Mr. MCNULTY, Mr. PASTOR, Mr. LARSON of Connecticut, Mr. ARCURI, Mr. HINOJOSA, Mr. COHEN, Mr. LANGEVIN, Mr. Abercrombie, Ms. DeGette, Mr. Higgins, Mr. Shays, Mr. ENGEL, Mr. GENE GREEN of Texas, Mrs. TAUSCHER, Mr. ALLEN, Mr. GRIJALVA, Mr. GONZALEZ, Ms. HERSETH SANDLIN, Mr. SIRES, Mr. BOUCHER, Mrs. CAPPS, Mr. BACA, Mrs. NAPOLITANO, Mr. ORTIZ, Mr. SALAZAR, Mr. LAMPSON, Ms. SOLIS, Ms. VELÁZQUEZ, Mr. RODRIGUEZ, Mr. CARDOZA, Mr. BECERRA, Mr. STARK, Ms. LORETTA SANCHEZ of California, Mr. CUELLAR, Mr. GUTIERREZ, Mr. SERRANO, Ms. LINDA T. SÁNCHEZ OF California, Ms. DELAURO, Mrs. LOWEY, Ms. LEE, Mr. JACKSON of Illinois, Mr. KENNEDY, Mr. HONDA, Mr. RYAN of Ohio, Ms. WASSERMAN SCHULTZ, Ms. BERKLEY, Ms. RICHARDSON, Mr. HASTINGS of Florida, Mr. HINCHEY, Mr. BERRY, Mr. DUNCAN, Mr. BURGESS, Mr. FOSSELLA, Ms. PRYCE of Ohio, Mrs. CAPITO, Mr. MCHUGH, Mr. JOHN-SON of Georgia, Mr. FILNER, Mr. DAVIS of Illinois, Ms. GRANGER, Mr. TIM MURPHY of Pennsylvania, Ms. HIRONO, Mr. MOORE of Kansas, and Mr. Lewis of Georgia

April 8, 2008

Reported with an amendment, committed to the Committee of the Whole House on the State of the Union, and ordered to be printed [Strike out all after the enacting clause and insert the part printed in italic]

[For text of introduced bill, see copy of bill as introduced on October 15, 2007]

A BILL

- To amend the Public Health Service Act to establish grant programs to provide for education and outreach on newborn screening and coordinated followup care once newborn screening has been conducted, to reauthorize programs under part A of title XI of such Act, and for other purposes.
 - 1 Be it enacted by the Senate and House of Representa-
 - 2 tives of the United States of America in Congress assembled,

3 SECTION 1. SHORT TITLE.

4 This Act may be cited as the "Newborn Screening
5 Saves Lives Act of 2008".

6 SEC. 2. IMPROVED NEWBORN AND CHILD SCREENING FOR 7 HERITABLE DISORDER.

8 Section 1109 of the Public Health Service Act (42
9 U.S.C. 300b-8) is amended—

10 (1) by striking subsections (a), (b), and (c) and
11 inserting the following:

12 "(a) AUTHORIZATION OF GRANT PROGRAM.—From
13 amounts appropriated under subsection (j), the Secretary,
14 acting through the Administrator of the Health Resources

and Services Administration (referred to in this section as
 the 'Administrator') and in consultation with the Advisory
 Committee on Heritable Disorders in Newborns and Chil dren (referred to in this section as the 'Advisory Com mittee'), shall award grants to eligible entities to enable
 such entities—

7 "(1) to enhance, improve or expand the ability
8 of State and local public health agencies to provide
9 screening, counseling, or health care services to
10 newborns and children having or at risk for heritable
11 disorders;

"(2) to assist in providing health care professionals and newborn screening laboratory personnel
with education in newborn screening and training in
relevant and new technologies in newborn screening
and congenital, genetic, and metabolic disorders;

"(3) to develop and deliver educational programs
(at appropriate literacy levels) about newborn screening counseling, testing, follow-up, treatment, and specialty services to parents, families, and patient advocacy and support groups; and

22 "(4) to establish, maintain, and operate a system
23 to assess and coordinate treatment relating to con24 genital, genetic, and metabolic disorders.

"(b) ELIGIBLE ENTITY.—In this section, the term 'eli gible entity' means—

3 "(1) a State or a political subdivision of a State;
4 "(2) a consortium of 2 or more States or polit5 ical subdivisions of States;
6 "(3) a territory;
7 "(4) a health facility or program operated by or
8 pursuant to a contract with or grant from the Indian
9 Health Service; or

10 "(5) any other entity with appropriate expertise 11 in newborn screening, as determined by the Secretary. 12 "(c) APPROVAL FACTORS.—An application submitted 13 for a grant under subsection (a)(1) shall not be approved by the Secretary unless the application contains assurances 14 15 that the eligible entity has adopted and implemented, is in the process of adopting and implementing, or will use 16 amounts received under such grant to adopt and implement 17 the quidelines and recommendations of the Advisory Com-18 19 mittee that are adopted by the Secretary and in effect at 20 the time the grant is awarded or renewed under this section, 21 which shall include the screening of each newborn for the 22 heritable disorders recommended by the Advisory Com-23 mittee and adopted by the Secretary.";

24 (2) by redesignating subsections (d) through (i)
25 as subsections (e) through (j), respectively;

(3) by inserting after subsection (c), the fol lowing:

3 "(d) COORDINATION.—The Secretary shall take all nec4 essary steps to coordinate programs funded with grants re5 ceived under this section and to coordinate with existing
6 newborn screening activities."; and

7 (4) by striking subsection (j) (as so redesignated)
8 and inserting the following:

9 "(j) AUTHORIZATION OF APPROPRIATIONS.—There are
10 authorized to be appropriated—

11 "(1) to provide grants for the purpose of car-12 rying out activities under subsection (a)(1).13 \$15,000,000 for fiscal year 2009, \$15,187,500 for fis-14 cal year 2010, \$15,375,000 for fiscal year 2011, 15 \$15,562,500 for fiscal year 2012, and \$15,750,000 for 16 fiscal year 2013; and

"(2) to provide grants for the purpose of carrying out activities under paragraphs (2), (3), and
(4) of subsection (a), \$15,000,000 for fiscal year 2009,
\$15,187,500 for fiscal year 2010, \$15,375,000 for fiscal year 2011, \$15,562,500 for fiscal year 2012, and
\$15,750,000 for fiscal year 2013.".

1	SEC. 3. EVALUATING THE EFFECTIVENESS OF NEWBORN
2	AND CHILD SCREENING PROGRAMS.
3	Section 1110 of the Public Health Service Act (42
4	U.S.C. 300b-9) is amended by adding at the end the fol-
5	lowing:
6	"(d) AUTHORIZATION OF APPROPRIATIONS.—There
7	are authorized to be appropriated to carry out this section
8	\$5,000,000 for fiscal year 2009, \$5,062,500 for fiscal year
9	2010, \$5,125,000 for fiscal year 2011, \$5,187,500 for fiscal
10	year 2012, and \$5,250,000 for fiscal year 2013.".
11	SEC. 4. ADVISORY COMMITTEE ON HERITABLE DISORDERS
12	IN NEWBORNS AND CHILDREN.
13	Section 1111 of the Public Health Service Act (42
14	U.S.C. 300b–10) is amended—
15	(1) in subsection (b)—
16	(A) by redesignating paragraph (3) as
17	paragraph (6);
18	(B) in paragraph (2), by striking "and"
19	after the semicolon;
20	(C) by inserting after paragraph (2) the fol-
21	lowing:
22	"(3) make systematic evidence-based and peer-re-
23	viewed recommendations that include the heritable
24	disorders that have the potential to significantly im-
25	pact public health for which all newborns should be
26	screened, including secondary conditions that may be

identified as a result of the laboratory methods used
 for screening;

3 "(4) develop a model decision-matrix for new4 born screening expansion, including an evaluation of
5 the potential public health impact of such expansion,
6 and periodically update the recommended uniform
7 screening panel, as appropriate, based on such deci8 sion-matrix;

9 "(5) consider ways to ensure that all States at-10 tain the capacity to screen for the conditions de-11 scribed in paragraph (3), and include in such consid-12 eration the results of grant funding under section 13 1109; and";

14(D) in paragraph (6) (as so redesignated by15subparagraph (A)), by striking the period at the16end and inserting ", which may include rec-17ommendations, advice, or information dealing18with—

19 "(A) follow-up activities, including those
20 necessary to achieve rapid diagnosis in the short21 term, and those that ascertain long-term case
22 management outcomes and appropriate access to
23 related services;

24 "(B) implementation, monitoring, and eval25 uation of newborn screening activities, including

1	diagnosis, screening, follow-up, and treatment
2	activities;
3	``(C) diagnostic and other technology used
4	in screening;
5	``(D) the availability and reporting of test-
6	ing for conditions for which there is no existing
7	treatment;
8	``(E) conditions not included in the rec-
9	ommended uniform screening panel that are
10	treatable with Food and Drug Administration-
11	approved products or other safe and effective
12	treatments, as determined by scientific evidence
13	and peer review;
14	``(F) minimum standards and related poli-
15	cies and procedures used by State newborn
16	screening programs, such as language and termi-
17	nology used by State newborn screening pro-
18	grams to include standardization of case defini-
19	tions and names of disorders for which newborn
20	screening tests are performed;
21	``(G) quality assurance, oversight, and eval-
22	uation of State newborn screening programs, in-
23	cluding ensuring that tests and technologies used
24	by each State meet established standards for de-
25	tecting and reporting positive screening results;

1	"(H) public and provider awareness and
2	education;
3	``(I) the cost and effectiveness of newborn
4	screening and medical evaluation systems and
5	intervention programs conducted by State-based
6	programs;
7	``(J) identification of the causes of, public
8	health impacts of, and risk factors for heritable
9	disorders; and
10	"(K) coordination of surveillance activities,
11	including standardized data collection and re-
12	porting, harmonization of laboratory definitions
13	for heritable disorders and testing results, and
14	confirmatory testing and verification of positive
15	results, in order to assess and enhance moni-
16	toring of newborn diseases."; and
17	(2) in subsection $(c)(2)$ —
18	(A) by redesignating subparagraphs (E),
19	(F), and (G) as subparagraphs (F) , (H) , and (I) ,
20	respectively;
21	(B) by inserting after subparagraph (D) the
22	following:
23	(E) the Commissioner of the Food and
24	Drug Administration;"; and

1	(C) by inserting after subparagraph (F), as
2	so redesignated, the following:
3	``(G) individuals with expertise in ethics
4	and infectious diseases who have worked and
5	published material in the area of newborn
6	screening;"; and
7	(3) by adding at the end the following:
8	"(d) Decision on Recommendations.—
9	"(1) IN GENERAL.—Not later than 180 days
10	after the Advisory Committee issues a recommenda-
11	tion pursuant to this section, the Secretary shall
12	adopt or reject such recommendation.
13	"(2) Pending recommendations.—The Sec-
14	retary shall adopt or reject any recommendation
15	issued by the Advisory Committee that is pending on
16	the date of enactment of the Newborn Screening Saves
17	Lives Act of 2008 by not later than 180 days after
18	the date of enactment of such Act.
19	"(3) Determinations to be made public.—
20	The Secretary shall publicize any determination on
21	adopting or rejecting a recommendation of the Advi-
22	sory Committee pursuant to this subsection, including
23	the justification for the determination.
24	"(e) ANNUAL REPORT.—Not later than 3 years after
25	the date of enactment of the Newborn Screening Saves Lives

Act of 2008, and each fiscal year thereafter, the Advisory
 Committee shall—

3 "(1) publish a report on peer-reviewed newborn 4 screening guidelines, including follow-up and treat-5 ment, in the United States; 6 "(2) submit such report to the appropriate com-7 mittees of Congress, the Secretary, the Interagency 8 Coordinating Committee established under Section 9 1114, and the State departments of health; and 10 "(3) disseminate such report on as wide a basis 11 as practicable, including through posting on the inter-12 net clearinghouse established under section 1112. 13 "(f) CONTINUATION OF OPERATION OF COMMITTEE.— 14 Notwithstanding section 14 of the Federal Advisory Com-15 mittee Act (5 U.S.C. App.), the Advisory Committee shall continue to operate during the 5-year period beginning on 16 the date of enactment of the Newborn Screening Saves Lives 17 Act of 2008. 18

19 "(g) AUTHORIZATION OF APPROPRIATIONS.—There
20 are authorized to be appropriated to carry out this section,
21 \$1,000,000 for fiscal year 2009, \$1,012,500 for fiscal year
22 2010, \$1,025,000 for fiscal year 2011, \$1,037,500 for fiscal
23 year 2012, and \$1,050,000 for fiscal year 2013.".

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1 SEC. 5. INFORMATION CLEARINGHOUSE.

2 Part A of title XI of the Public Health Service Act
3 (42 U.S.C. 300b-1 et seq.) is amended by adding at the
4 end the following:

5 "SEC. 1112. CLEARINGHOUSE OF NEWBORN SCREENING IN6 FORMATION.

7 "(a) IN GENERAL.—The Secretary, acting through the 8 Administrator of the Health Resources and Services Admin-9 istration (referred to in this part as the 'Administrator'), in consultation with the Director of the Centers for Disease 10 Control and Prevention and the Director of the National 11 Institutes of Health, shall establish and maintain a central 12 clearinghouse of current educational and family support 13 and services information, materials, resources, research, 14 and data on newborn screening to-15

"(1) enable parents and family members of
newborns, health professionals, industry representatives, and other members of the public to increase
their awareness, knowledge, and understanding of
newborn screening;

21 "(2) increase awareness, knowledge, and under22 standing of newborn diseases and screening services
23 for expectant individuals and families; and

24 "(3) maintain current data on quality indica25 tors to measure performance of newborn screening,
26 such as false-positive rates and other quality indica-

1	tors as determined by the Advisory Committee under
2	section 1111.
3	"(b) INTERNET AVAILABILITY.—The Secretary, acting
4	through the Administrator, shall ensure that the clearing-
5	house described under subsection (a)—
6	"(1) is available on the Internet;
7	"(2) includes an interactive forum;
8	"(3) is updated on a regular basis, but not less
9	than quarterly; and
10	"(4) provides—
11	"(A) links to Government-sponsored, non-
12	profit, and other Internet websites of laboratories
13	that have demonstrated expertise in newborn
14	screening that supply research-based information
15	on newborn screening tests currently available
16	throughout the United States;
17	``(B) information about newborn conditions
18	and screening services available in each State
19	from laboratories certified under subpart 2 of
20	part F of title III, including information about
21	supplemental screening that is available but not
22	required, in the State where the infant is born;
23	(C) current research on both treatable and
24	not-yet treatable conditions for which newborn
25	screening tests are available;

"(D) the availability of Federal funding for 1 2 newborn and child screening for heritable disorders including grants authorized under the 3 4 Newborn Screening Saves Lives Act of 2008; and (E) other relevant information as deter-5 6 mined appropriate by the Secretary. "(c) NONDUPLICATION.—In developing the clearing-7 8 house under this section, the Secretary shall ensure that 9 such clearinghouse minimizes duplication and supplements, not supplants, existing information sharing efforts. 10 11 "(d) AUTHORIZATION OF APPROPRIATIONS.—There 12 are authorized to be appropriated to carry out this section, \$2,500,000 for fiscal year 2009, \$2,531,250 for fiscal year 13 2010, \$2,562,500 for fiscal year 2011, \$2,593,750 for fiscal 14 15 year 2012, and \$2,625,000 for fiscal year 2013.". 16 SEC. 6. LABORATORY QUALITY AND SURVEILLANCE. 17 Part A of title XI of the Public Health Service Act (42 U.S.C. 300b-1 et seq.), as amended by section 5, is fur-18 ther amended by adding at the end the following: 19 20 "SEC. 1113. LABORATORY QUALITY. "(a) IN GENERAL.—The Secretary, acting through the 21 22 Director of the Centers for Disease Control and Prevention 23 and in consultation with the Advisory Committee on Heri-24 table Disorders in Newborns and Children established under section 1111, shall provide for— 25

1	"(1) quality assurance for laboratories involved
2	in screening newborns and children for heritable dis-
3	orders, including quality assurance for newborn-
4	screening tests, performance evaluation services, and
5	technical assistance and technology transfer to new-
6	born screening laboratories to ensure analytic validity
7	and utility of screening tests; and
8	"(2) appropriate quality control and other per-
9	formance test materials to evaluate the performance of
10	new screening tools.
11	"(b) AUTHORIZATION OF APPROPRIATIONS.—For the
12	purpose of carrying out this section, there are authorized
13	to be appropriated \$5,000,000 for fiscal year 2009,
14	\$5,062,500 for fiscal year 2010, \$5,125,000 for fiscal year
15	2011, \$5,187,500 for fiscal year 2012, and \$5,250,000 for
16	fiscal year 2013.
17	"SEC. 1114. INTERAGENCY COORDINATING COMMITTEE ON
18	NEWBORN AND CHILD SCREENING.
19	"(a) PURPOSE.—It is the purpose of this section to—
20	"(1) assess existing activities and infrastructure,
21	including activities on birth defects and develop-
22	mental disabilities authorized under section 317C, in
23	order to make recommendations for programs to col-
24	lect, analyze, and make available data on the heri-

25 table disorders recommended by the Advisory Com-

1	millee on Heritable Disoraers in Newborns and Unu-
2	dren under section 1111, including data on the inci-
3	dence and prevalence of, as well as poor health out-
4	comes resulting from, such disorders; and
5	"(2) make recommendations for the establishment
6	of regional centers for the conduct of applied epide-
7	miological research on effective interventions to pro-
8	mote the prevention of poor health outcomes resulting
9	from such disorders as well as providing information
10	and education to the public on such effective interven-
11	tions.

12 "(b) ESTABLISHMENT.—The Secretary shall establish
13 an Interagency Coordinating Committee on Newborn and
14 Child Screening (referred to in this section as the 'Inter15 agency Coordinating Committee') to carry out the purpose
16 of this section.

17 "(c) COMPOSITION.—The Interagency Coordinating
18 Committee shall be composed of the Director of the Centers
19 for Disease Control and Prevention, the Administrator, the
20 Director of the Agency for Healthcare Research and Qual21 ity, and the Director of the National Institutes of Health,
22 or their designees.

23 "(d) ACTIVITIES.—The Interagency Coordinating
24 Committee shall—

mittee on Heritable Disorders in Newborns and Chil-

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"(1) report to the Secretary and the appropriate
 committees of Congress on its recommendations re lated to the purpose described in subsection (a); and
 "(2) carry out other activities determined appro priate by the Secretary.

6 "(e) AUTHORIZATION OF APPROPRIATIONS.—For the 7 purpose of carrying out this section, there are authorized 8 to be appropriated \$1,000,000 for fiscal year 2009, 9 \$1,012,500 for fiscal year 2010, \$1,025,000 for fiscal year 10 2011, \$1,037,500 for fiscal year 2012, and \$1,050,000 for 11 fiscal year 2013.".

12 SEC. 7. CONTINGENCY PLANNING.

13 Part A of title XI of the Public Health Service Act
14 (42 U.S.C. 300b-1 et seq.), as amended by section 6, is fur15 ther amended by adding at the end the following:

16 "SEC. 1115. NATIONAL CONTINGENCY PLAN FOR NEWBORN 17 SCREENING.

18 "(a) IN GENERAL.—Not later than 180 days after the date of enactment of this section, the Secretary, acting 19 through the Director of the Centers for Disease Control and 20 21 Prevention and in consultation with the Administrator and 22 State departments of health (or related agencies), shall de-23 velop a national contingency plan for newborn screening 24 for use by a State, region, or consortia of States in the event of a public health emergency. 25

1	"(b) CONTENTS.—The contingency plan developed
2	under subsection (a) shall include a plan for—
3	"(1) the collection and transport of specimens;
4	"(2) the shipment of specimens to State newborn
5	screening laboratories;
6	"(3) the processing of specimens;
7	"(4) the reporting of screening results to physi-
8	cians and families;
9	"(5) the diagnostic confirmation of positive
10	screening results;
11	"(6) ensuring the availability of treatment and
12	management resources;
13	"(7) educating families about newborn screening;
14	and
15	"(8) carrying out other activities determined ap-
16	propriate by the Secretary.
17	"SEC. 1116. HUNTER KELLY RESEARCH PROGRAM.
18	"(a) Newborn Screening Activities.—
19	"(1) IN GENERAL.—The Secretary, in conjunc-
20	tion with the Director of the National Institutes of
21	Health and taking into consideration the rec-
22	ommendations of the Advisory Committee, may con-
23	tinue carrying out, coordinating, and expanding re-
24	search in newborn screening (to be known as 'Hunter
24	search in newborn screening (to be known as 'Hunter

1	Kelly Newborn	Screening	Research	Program')	includ-
2	ing—				

3	"(A) identifying, developing, and testing the
4	most promising new screening technologies, in
5	order to improve already existing screening tests,
6	increase the specificity of newborn screening, and
7	expand the number of conditions for which
8	screening tests are available;

9 "(B) experimental treatments and disease 10 management strategies for additional newborn 11 conditions, and other genetic, metabolic, hor-12 monal, or functional conditions that can be de-13 tected through newborn screening for which 14 treatment is not yet available; and

"(C) other activities that would improve
newborn screening, as identified by the Director.
"(2) ADDITIONAL NEWBORN CONDITION.—For
purposes of this subsection, the term 'additional newborn condition' means any condition that is not one
of the core conditions recommended by the Advisory
Committee and adopted by the Secretary.

"(b) FUNDING.—In carrying out the research program
under this section, the Secretary and the Director shall ensure that entities receiving funding through the program
will provide assurances, as practicable, that such entities

will work in consultation with the appropriate State de partments of health, and, as practicable, focus their research
 on screening technology not currently performed in the
 States in which the entities are located, and the conditions
 on the uniform screening panel (or the standard test exist ing on the uniform screening panel).

"(c) REPORTS.—The Director is encouraged to include
information about the activities carried out under this section in the biennial report required under section 403 of
the National Institutes of Health Reform Act of 2006. If
such information is included, the Director shall make such
information available to be included on the Internet Clearinghouse established under section 1112.

14 "(d) NONDUPLICATION.—In carrying out programs
15 under this section, the Secretary shall minimize duplication
16 and supplement, not supplant, existing efforts of the type
17 carried out under this section.

18 "(e) PEER REVIEW.—Nothing in this section shall be
19 construed to interfere with the scientific peer-review process
20 at the National Institutes of Health.".

Union Calendar No. 352

110TH CONGRESS H. R. 3825

[Report No. 110-570]

A BILL

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