

BILL ANALYSIS

C.S.S.B. 791
By: Kolkhorst
Public Health
Committee Report (Substituted)

BACKGROUND AND PURPOSE

Cytomegalovirus (CMV) is a common virus that infects people of all ages. The majority of people who are infected with CMV have no signs or symptoms, and there usually are no harmful effects. However, interested parties note, when CMV occurs during a woman's pregnancy, the virus can be transmitted to the unborn infant and result in congenital CMV, which can potentially damage the brain, eyes, and inner ears of the unborn infant.

The parties estimate that roughly one of every five children born with congenital CMV infection will develop permanent problems, such as hearing loss or developmental disabilities, and note that congenital CMV is the leading non-genetic cause of childhood hearing loss. The parties express concern regarding the lack of information given to the public on how to prevent CMV, contending that every year more infants die or are permanently disabled from an infection that likely could have been prevented. C.S.S.B. 791 seeks to address this issue by increasing awareness of cytomegalovirus.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

RULEMAKING AUTHORITY

It is the committee's opinion that rulemaking authority is expressly granted to the executive commissioner of the Health and Human Services Commission in SECTION 2 of this bill.

ANALYSIS

C.S.S.B. 791 amends the Health and Safety Code, including provisions amended by S.B. 219, Acts of the 84th Legislature, Regular Session, 2015, to require the Department of State Health Services (DSHS) in consultation with the Texas Medical Board to develop and publish informational materials for women who may become pregnant, expectant parents, and parents of infants regarding the incidence of cytomegalovirus, the transmission of cytomegalovirus to pregnant women and women who may become pregnant, birth defects caused by congenital cytomegalovirus, available preventive measures to avoid the infection of women who are pregnant or may become pregnant, and resources available for families of children born with congenital cytomegalovirus. The bill requires the materials to be published in English and Spanish, in an easily comprehensible form, and in a typeface large enough to be clearly legible. The bill requires DSHS to review the materials periodically to determine whether changes to the contents of the materials are necessary.

C.S.S.B. 791 requires DSHS to publish the information on congenital cytomegalovirus on the DSHS website. The bill prohibits DSHS from charging a fee for physical copies of the materials and requires DSHS to provide appropriate quantities of the materials to any person on request. The bill requires DSHS to establish an outreach program to educate women who may become

pregnant, expectant parents, and parents of infants about cytomegalovirus and to raise awareness of cytomegalovirus among health care providers who provide care to expectant mothers or infants. The bill authorizes DSHS to solicit and accept the assistance of any relevant medical associations or community resources to promote education about congenital cytomegalovirus. The bill authorizes the executive commissioner of the Health and Human Services Commission to adopt rules for the implementation of the bill's provisions regarding congenital cytomegalovirus.

C.S.S.B. 791 includes educational information provided in both English and Spanish on the incidence of cytomegalovirus, birth defects caused by congenital cytomegalovirus, and available resources for the family of an infant born with congenital cytomegalovirus among the information required to be included in the resource pamphlet provided to an adult caregiver for an infant by a hospital, birthing center, physician, nurse midwife, or midwife who provides prenatal care to a pregnant woman during gestation or at delivery of the infant.

C.S.S.B. 791 requires DSHS, not later than January 1, 2016, to develop and publish the informational materials required by the bill's provisions and to revise the resource pamphlet provided to an adult caregiver of an infant.

EFFECTIVE DATE

September 1, 2015.

COMPARISON OF SENATE ENGROSSED AND SUBSTITUTE

While C.S.S.B. 791 may differ from the engrossed in minor or nonsubstantive ways, the following comparison is organized and formatted in a manner that indicates the substantial differences between the engrossed and committee substitute versions of the bill and does not indicate differences relating to changes made by S.B. 219, Acts of the 84th Legislature, Regular Session, 2015, which became effective April 2, 2015.

SENATE ENGROSSED

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

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

CHAPTER 46. CONGENITAL CYTOMEGALOVIRUS

Sec. 46.001. DEFINITIONS. In this chapter:

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

(2) "Department" means the Department of State Health Services.

Sec. 46.002. EDUCATIONAL MATERIALS ON CONGENITAL CYTOMEGALOVIRUS. (a) The

department, in consultation with the Texas Medical Board, shall develop and publish informational materials for women who may become pregnant, expectant parents, and

HOUSE COMMITTEE SUBSTITUTE

SECTION 1. Same as engrossed version.

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

CHAPTER 46. CONGENITAL CYTOMEGALOVIRUS

Sec. 46.001. DEFINITION. In this chapter, "congenital cytomegalovirus" means cytomegalovirus acquired by an infant before birth.

Sec. 46.002. EDUCATIONAL MATERIALS ON CONGENITAL CYTOMEGALOVIRUS. (a) The

department, in consultation with the Texas Medical Board, shall develop and publish informational materials for women who may become pregnant, expectant parents, and

parents of infants regarding:

- (1) the incidence of cytomegalovirus;
- (2) the transmission of cytomegalovirus to pregnant women and women who may become pregnant;
- (3) birth defects caused by congenital cytomegalovirus;
- (4) methods of diagnosing congenital cytomegalovirus;
- (5) available preventive measures to avoid the infection of women who are pregnant or may become pregnant; and
- (6) treatment options available for children born with congenital cytomegalovirus.

(b) The materials must be published in:

- (1) English and Spanish;
- (2) an easily comprehensible form; and
- (3) a typeface large enough to be clearly legible.

(c) The department shall periodically review the materials to determine if changes to the contents of the materials are necessary.

Sec. 46.003. PUBLICATION OF MATERIALS.

Sec. 46.004. EDUCATION AND OUTREACH.

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

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

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

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

- (1) the results of the test;
- (2) information on the potential effects of cytomegalovirus and the treatment options available; and
- (3) information that directs parents to

parents of infants regarding:

- (1) the incidence of cytomegalovirus;
- (2) the transmission of cytomegalovirus to pregnant women and women who may become pregnant;
- (3) birth defects caused by congenital cytomegalovirus;

(4) available preventive measures to avoid the infection of women who are pregnant or may become pregnant; and
(5) resources available for families of children born with congenital cytomegalovirus.

(b) The materials must be published in:

- (1) English and Spanish;
- (2) an easily comprehensible form; and
- (3) a typeface large enough to be clearly legible.

(c) The department shall periodically review the materials to determine if changes to the contents of the materials are necessary.

Sec. 46.003. PUBLICATION OF MATERIALS.

Sec. 46.004. EDUCATION AND OUTREACH.

Sec. 46.005. RULES. The executive commissioner may adopt rules for the implementation of this chapter.

No equivalent provision.

coordinate follow-up care with the infant's physician or health care provider.

SECTION 4. Section 161.501(a), Health and Safety Code, as amended by S.B. No. 219, Acts of the 84th Legislature, Regular Session, 2015, is amended to read as follows:

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

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

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

(B) information regarding the prevention of shaken baby syndrome including:

(i) techniques for coping with anger caused by a crying baby;

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

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

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

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

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

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

(F) educational information in both English and Spanish on:

(i) pertussis disease and the availability of a vaccine to protect against pertussis, including information on the Centers for Disease Control and Prevention recommendation that parents receive Tdap

SECTION 3. Section 161.501(a), Health and Safety Code, as amended by S.B. No. 219, Acts of the 84th Legislature, Regular Session, 2015, is amended to read as follows:

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

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

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

(B) information regarding the prevention of shaken baby syndrome including:

(i) techniques for coping with anger caused by a crying baby;

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

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

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

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

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

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

(F) educational information in both English and Spanish on:

(i) pertussis disease and the availability of a vaccine to protect against pertussis, including information on the Centers for Disease Control and Prevention recommendation that parents receive Tdap

during the postpartum period to protect newborns from the transmission of pertussis; and

(ii) the incidence of cytomegalovirus, methods of diagnosing congenital cytomegalovirus, birth defects caused by congenital cytomegalovirus, and available methods of treatment for an infant born with congenital cytomegalovirus;

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

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

(B) dental care;

(C) effective parenting;

(D) child safety;

(E) the importance of reading to a child;

(F) expected developmental milestones;

(G) health care resources available in the state;

(H) selecting appropriate child care; and

(I) other resources available in the state;

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

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

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

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

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

during the postpartum period to protect newborns from the transmission of pertussis; and

(ii) the incidence of cytomegalovirus, birth defects caused by congenital cytomegalovirus, and available resources for the family of an infant born with congenital cytomegalovirus;

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

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

(B) dental care;

(C) effective parenting;

(D) child safety;

(E) the importance of reading to a child;

(F) expected developmental milestones;

(G) health care resources available in the state;

(H) selecting appropriate child care; and

(I) other resources available in the state;

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

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

SECTION 4. (a) The Department of State Health Services shall develop and publish the materials required by Chapter 46, Health and Safety Code, as added by this Act, not later than January 1, 2016.

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

SECTION 6. This Act takes effect
September 1, 2015.

SECTION 5. Same as engrossed version.