
DIGEST

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HB 283 Engrossed

2016 Regular Session

Emerson

Abstract: Requires all newborns to be screened for Krabbe disease.

Present law requires the physician attending a newborn child, or the person attending a newborn child who was not attended by a physician, to have the child tested for all of the following:

- (1) Phenylketonuria.
- (2) Congenital hypothyroidism.
- (3) Sickle cell diseases.
- (4) Biotinidase deficiency.
- (5) Congenital adrenal hyperplasia.
- (6) Carnitine uptake defect.
- (7) Long-chain 3-hydroxyacyl-CoA dehydrogenase deficiency.
- (8) Medium-chain acyl-CoA dehydrogenase deficiency.
- (9) Trifunctional protein deficiency.
- (10) Very long-chain acyl-CoA dehydrogenase deficiency.
- (11) Glutaric acidemia type I.
- (12) 3-hydroxy-3-methylglutaryl-CoA lyase deficiency.
- (13) Isovaleric acidemia.
- (14) 3-methylcrotonyl-CoA carboxylase deficiency.
- (15) Methylmalonic acidemia (CBL A,B).
- (16) Beta ketothiolase.
- (17) Methylmalonic acidemia (MUT).
- (18) Propionic acidemia.
- (19) Multiple carboxylase deficiency.
- (20) Argininosuccinate acidemia.
- (21) Citrullinemia type I.
- (22) Homocystinuria.
- (23) Maple syrup urine disease.
- (24) Tyrosinemia type I.
- (25) Other genetic conditions that have been approved by the Dept. of Health and Hospitals.

Proposed law retains present law and adds Krabbe disease to the list of required screenings.

Present law further provides that no such tests shall be given to any child whose parents object.

Proposed law retains present law.

Present law requires the physician attending a newborn child to have the child subjected to tests for cystic fibrosis effective July 1, 2007.

Proposed law retains present law but makes a technical change by relocating the requirement through adding cystic fibrosis to the list of required tests and deleting the current language.

Proposed law requires the Dept. of Health and Hospitals to develop and maintain the following information regarding Krabbe disease on its website:

- (1) An explanation of Krabbe disease symptoms, diagnosis, and treatment options.
- (2) Information on relevant state agency and nonprofit resources, parent support groups, and available Medicaid waiver services.

(Amends R.S. 40:1081.2(A)(1); Adds R.S. 40:1081.11)

Summary of Amendments Adopted by House

The Committee Amendments Proposed by House Committee on Health and Welfare to the original bill:

1. Make technical changes.
2. Make proposed law relative to adding Krabbe disease to the screening panel for newborns subject to appropriation by the legislature.
3. Require DHH to post information regarding Krabbe disease on its website.
4. Designate the Act as "The Anniston Bazar Act".