ALASKA STATE LEGISLATURE

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SENATOR PETER A. MICCICHE

SPONSOR STATEMENT SB 87-NEWBORN SCREENING FOR HEART DEFECTS

DISTRICT O

Anchor Point

Clam Gulch

Cohoe

Diamond Ridge

Fox River

Fritz Creek

Funny River

Halibut Cove

Happy Valley

Homer

Kachemak City

Kachemak Selo

Kalifornsky

Kasilof

Kenai

Nikolaevsk

Ninilchik

Razdolna

Ridgeway

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Seldovia

Soldoma

Voznesenka

Every week Alaska babies are discharged from hospitals with undetected heart problems. Approximately 115 Alaska babies will be born this year with congenital heart defects – the number one killer of infants with birth defects, according to the American Heart Association.

In September of 2011, the US Secretary of Health and Human Services recommended that all newborns be screened for critical congenital heart disease (CCHD) prior to being discharged from the birth hospital. That recommendation is endorsed by the American Academy of Pediatrics, March of Dimes, American Heart Association and the Newborn Coalition.

Newborn screening for CCHD uses pulse oximetry — a simple, noninvasive, and effective test to measure the percent of oxygen in the blood. This screening costs less than a diaper change in the newborn nursery and is conducted in most nurseries at bedside, using existing staff and, most often, existing equipment. Pulse oximetry, recognizable as the finger clip with a blue light affixed on adult hospital patients, is considered the 5th vital sign by most clinicians — as simple and valuable as a blood pressure or temperature reading.

This biil will require larger hospitals, beginning in January 2014, to test newborns with pulse oximetry. Birthing centers and hospitals with fewer than 50 beds will have until January 2016 in the event they require additional time to acquire the necessary equipment. Parents will have the option of declining the testing.

In the event the tests shows abnormal results, the attending physician, direct-entry midwife or other qualified health care professional will advise the parents of the necessity for intervention treatment.

Most heaith insurance plans will cover the small cost under AS 21.42.351 Coverage for well-baby exams, and other state statutes. Medicaid patients will see the cost covered as well. Early diagnosis and intervention of those born with CCHD tend to lower cost of treatment.

Additionally, the bill provides a mechanism for hospitals to report newborn pulse oximetry screening results to the public health community, through the Department of Health and Social Services, a critical step in understanding and treating the detected defect.

This bill is vital to support timely and effective implementation of newborn screening for the most critical heart defects for babies born in the state's hospitals and birthing centers.

This bill is a relatively simple step that will save many young Alaskans' lives.