



February 16, 2018

---

---

**ENGROSSED**  
**HOUSE BILL No. 1017**

---

DIGEST OF HB 1017 (Updated February 14, 2018 10:08 am - DI 84)

**Citations Affected:** IC 16-41.

**Synopsis:** Newborn screening. Adds spinal muscular atrophy and severe combined immunodeficiency to the list of disorders in the newborn screening requirements.

**Effective:** April 1, 2018.

---

---

**Gutwein, Schaibley, Karickhoff,**  
**Porter, Bosma**

(SENATE SPONSORS — CHARBONNEAU, HEAD, BECKER)

---

---

January 3, 2018, read first time and referred to Committee on Public Health.  
January 18, 2018, amended, reported — Do Pass. Referred to Committee on Ways and Means pursuant to Rule 127.  
January 22, 2018, reported — Do Pass.  
January 25, 2018, read second time, ordered engrossed. Engrossed.  
January 29, 2018, read third time, passed. Yeas 96, nays 0.

SENATE ACTION

February 1, 2018, read first time and referred to Committee on Health and Provider Services.  
February 15, 2018, reported favorably — Do Pass; reassigned to Committee on Appropriations.

---

---

EH 1017—LS 6156/DI 104





February 16, 2018

Second Regular Session of the 120th General Assembly (2018)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2017 Regular Session of the General Assembly.

## ENGROSSED HOUSE BILL No. 1017

---

A BILL FOR AN ACT to amend the Indiana Code concerning health.

*Be it enacted by the General Assembly of the State of Indiana:*

1 SECTION 1. IC 16-41-17-2, AS AMENDED BY P.L.117-2015,  
2 SECTION 34, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE  
3 APRIL 1, 2018]: Sec. 2. (a) Subject to subsection (d), every infant shall  
4 be given examinations at the earliest feasible time for the detection of  
5 the following disorders:  
6 (1) Phenylketonuria.  
7 (2) Hypothyroidism.  
8 (3) Hemoglobinopathies, including sickle cell anemia.  
9 (4) Galactosemia.  
10 (5) Maple Syrup urine disease.  
11 (6) Homocystinuria.  
12 (7) Inborn errors of metabolism that result in an intellectual  
13 disability and that are designated by the state department.  
14 (8) Congenital adrenal hyperplasia.  
15 (9) Biotinidase deficiency.  
16 (10) Disorders detected by tandem mass spectrometry or other  
17 technologies with the same or greater detection capabilities as

**EH 1017—LS 6156/DI 104**



- 1 tandem mass spectrometry, if the state department determines that  
2 the technology is available for use by a designated laboratory  
3 under section 7 of this chapter.
- 4 **(11) Spinal muscular atrophy.**  
5 **(12) Severe combined immunodeficiency.**
- 6 (b) Subject to subsection (d), every infant shall be given a  
7 physiologic hearing screening examination at the earliest feasible time  
8 for the detection of hearing impairments.
- 9 (c) Beginning January 1, 2012, and subject to subsection (d), every  
10 infant shall be given a pulse oximetry screening examination at the  
11 earliest feasible time for the detection of low oxygen levels. Section  
12 10(a)(2) of this chapter does not apply to this subsection.
- 13 (d) If a parent of an infant objects in writing, for reasons pertaining  
14 to religious beliefs only, the infant is exempt from the examinations  
15 required by this chapter.
- 16 **SECTION 2. An emergency is declared for this act.**



COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred House Bill 1017, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 2, between lines 4 and 5, begin a new line block indented and insert:

**"(12) Severe combined immunodeficiency."**

and when so amended that said bill do pass.

(Reference is to HB 1017 as introduced.)

KIRCHHOFFER

Committee Vote: yeas 11, nays 0.

---

COMMITTEE REPORT

Mr. Speaker: Your Committee on Ways and Means, to which was referred House Bill 1017, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill do pass.

(Reference is to HB1017 as printed January 19, 2018.)

BROWN T

Committee Vote: Yeas 21, Nays 0

---

COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred House Bill No. 1017, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill DO PASS and be reassigned to the Senate Committee on Appropriations.

(Reference is to HB 1017 as printed January 23, 2018.)

CHARBONNEAU, Chairperson

Committee Vote: Yeas 8, Nays 0

**EH 1017—LS 6156/DI 104**

