

Title 64 Series 91
Department of Health and Human Resources
Bureau for Public Health
Newborn Screening System
Summary of Public Comments

COMMENTS AND RESPONSES

The descriptions of public comments below are a paraphrasing of the originally submitted comments. The full text of each public comment has been filed with the Secretary of State's Office.

Comment

The West Virginia Hospital Association (WVHA) opposes removing the current cap on the fee for newborn screening system kits, as is proposed in section 7 of the proposed rule. The WVHA asserts that the fee associated with these kits has more than doubled since July 2008, from \$50 up to \$125, and removing the cap will further increase the fee charged and add to the economic burden facing our facilities.

Response

The current rule includes a cap on the on the fee the Bureau may charge to cover the cost of laboratory testing by the Bureau's Office of Laboratory Services (OLS). The Bureau proposes to amend the rule to remove the fee cap because the Bureau's cost of performing the mandated laboratory cost exceeds the cap contained in the current legislative rule.

West Virginia law directs the hospital or birthing center in which an infant is born, the parents or legal guardians, the physician attending a newborn child, or any person attending a newborn child not under the care of a physician to ensure that each such child be tested for determined to be afflicted with any disease specified in *W. Va. Code* §16-22-3, and certain other diseases specified by the Bureau for Public Health. The section requires the Bureau to propose legislative rules to include: a means for payment for the screening provided for in this section

In accordance with this mandate, the current rule provides for a means of payment for the required screenings, and any further referral or treatment services considered necessary by the to implement the provisions of the statute on newborn screening.

The current rule contains caps the fee that may be charged to birthing facilities at a rate not to exceed \$125.00 per newborn screening system kit. §8.4. The actual cost of performing the appropriate laboratory testing exceed \$125 during the previous fiscal year. Thus, the Bureau is now subsidizing the cost of the testing from its appropriated budget. If the current cap is not removed, the state will have to incur the excess costs rather than including it in the fee charged to birthing facilities.

The Bureau is conscious of the economic burden imposed by the proposed amendment and proposes to tie the amount that will be billed the birthing facility or individual attending the birth for services to prevailing health insurance reimbursement rates for newborn screening to cover

the administrative, laboratory, and follow-up costs associated with the performance of required screening tests. §7.1 Further, the bureau will periodically review the newborn screening program to determine the efficacy and cost-effectiveness of the program and determine whether adjustments to the program are necessary to protect the health and welfare of this state's newborns, and to maximize the number of newborn screenings that may be conducted with the funding available for the screenings. §7.3.

Therefore the Bureau declines to modify the rule as recommended.

Comment

Melanie Dempsey, CFO for Davis Medical Center indicated that Davis Medical Center was concerned that if the cap were to be removed individual birthing facilities would incur increased financial cost associated with screening thus, adding to its economic burden. Consequently, she requests that the cap not be removed.

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As noted above, the Bureau is conscious of the economic burden imposed by the proposed amendment and proposes to tie the amount that will be billed the birthing facility or individual attending the birth for services to prevailing health insurance reimbursement rates for newborn screening to cover the administrative, laboratory, and follow-up costs associated with the performance of required screening tests. §7.1 Further, the bureau will periodically review the newborn screening program to determine the efficacy and cost-effectiveness of the program and determine whether adjustments to the program are necessary to protect the health and welfare of this state's newborns, and to maximize the number of newborn screenings that may be conducted with the funding available for the screenings. §7.3.

Therefore the Bureau declines to modify the rule as recommended.



100 Association Drive
Charleston, WV 25311-1571
Phone (304)344-9744
www.wvha.org

July 19, 2018

RECEIVED

JUL 19 2018

Brian Skinner
350 Capitol Street, Suite 702
Charleston, WV 25301

COMMISSIONER'S OFFICE
BUREAU FOR PUBLIC HEALTH

Dear Mr. Skinner:

Re: LEGISLATIVE RULE 64CSR91, HEALTH RULE ON NEWBORN SCREENING SYSTEM

On behalf of the West Virginia Hospital Association and its 63 member hospitals and health systems, we respectfully submit this letter to provide public comments in response to the above referenced **Legislative Rule 64CSR91, Health Rule on Newborn Screening System**.

§64-91-7. Screening Fee Schedule.

We oppose removing the current cap on the fee for newborn screening system kits, as is proposed in this section. The fee associated with these kits has more than doubled since July 2008, from \$50 up to \$125. Removing this cap will further increase the fee charged and add to the economic burden facing our facilities.

If you have any questions or concerns, please contact me at (304) 353-9720.

Sincerely,

A handwritten signature in black ink, appearing to read "Brandon Hatfield", written in a cursive style.

Brandon Hatfield
General Counsel



812 Gorman Avenue • Elkins, WV 26241 • 304.636.3300 • Fax 304.637.3435 • davishealthsystem.org

July 16, 2018

Mr. Brandon Hatfield
West Virginia Hospital Association
100 Association Drive
Charleston, WV 25311

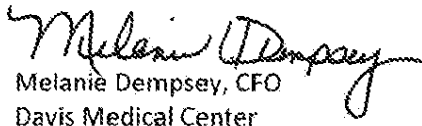
Dear Mr. Hatfield;

In response to the Department of Health and Human Resources (DHHR) proposed legislative rules relating to Newborn Screening comment period, Davis Medical Center would like to voice our concerns regarding removal of the laboratory fee cap. Should this cap be removed, individual birthing facilities would incur increased financial cost associated with Newborn Screenings adding to our economic burden.

The Screening Fee Schedule proposed changes listed within 64-91-7. has risen from (\$50.00) to more than double since July 2008 at a cost of (\$125.00). Should the fee to the birthing facility be amended at a similar historical rate/amount, this would cost our small yet vital birthing center an additional estimated (\$20,625).

Therefore, as an essential rural health care provider we respectfully request reconsideration of this amendment to 64CSR91 and ask the laboratory fee cap be not removed.

Thank you,


Melanie Dempsey, CFO
Davis Medical Center



