
THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 1478 Session of
2015

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COHEN, AUGUST 10, 2015

REFERRED TO COMMITTEE ON HEALTH, AUGUST 10, 2015

AN ACT

1 Establishing the Infant Vision Information, Education and
2 Wellness Program; and providing for powers and duties of the
3 Department of Health.

4 The General Assembly of the Commonwealth of Pennsylvania
5 hereby enacts as follows:

6 Section 1. Short title.

7 This act shall be known and may be cited as the Infant Vision
8 Information, Education and Wellness Act.

9 Section 2. Legislative findings and purpose.

10 (a) Findings.--The General Assembly finds as follows:

11 (1) Early detection of vision-threatening and
12 potentially life-threatening vision abnormalities is vital
13 for early treatment of ocular diseases that occur frequently
14 in newborns and infants.

15 (2) Emphasis on early detection of vision abnormalities,
16 including cataracts, glaucoma, leukocoria, retinoblastoma,
17 retinal abnormalities, systemic diseases with ocular

1 manifestations and high refractive errors, can help prevent
2 long-term disability and developmental delays in children.

3 (3) Children with abnormal ocular diseases who receive
4 screening during the neonatal and infant period must be
5 referred to an ophthalmologist or optometrist for follow-up
6 consultation and treatment.

7 (4) The American Academy of Pediatrics currently
8 recommends red reflex assessment as a component of the vision
9 evaluation during the neonatal period and during all
10 subsequent routine health visits.

11 (5) The red reflex assessment is conducted by a
12 pediatrician or other primary care provider using an
13 ophthalmoscope during the neonatal period after birth, at the
14 age of six weeks and during routine health visits.

15 (b) Purpose.--The purposes of this act are to provide:

16 (1) Infant vision screening for all newborns born in a
17 hospital or within 30 days of the date of birth for those
18 newborns born outside a hospital to enable these infants and
19 their families to obtain needed comprehensive evaluation,
20 treatment and intervention services at the earliest
21 opportunity and to thus prevent or mitigate the developmental
22 delays and excessive costs associated with late
23 identification of vision abnormalities.

24 (2) The Department of Health with the information
25 necessary to effectively plan, establish, administer and
26 evaluate this comprehensive program of appropriate services
27 for newborns, infants and children who have vision
28 abnormalities.

29 Section 3. Definitions.

30 The following words and phrases when used in this act shall

1 have the meanings given to them in this section unless the
2 context clearly indicates otherwise:

3 "Birth admission." The time after birth that the newborn
4 remains in the hospital or birth center prior to discharge.

5 "Birth center." An entity licensed as a birth center under
6 the act of July 19, 1979 (P.L.130, No.48), known as the Health
7 Care Facilities Act.

8 "Child." An individual who is under 21 years of age.

9 "Committee." The Department of Health's Newborn Vision
10 Screening Advisory Committee.

11 "Department." The Department of Health of the Commonwealth.

12 "Early intervention." The Statewide system of coordinated,
13 multidisciplinary, interagency programs in existence on the
14 effective date of this act maintained by the Department of
15 Education, the Department of Health and the Department of Human
16 Services to provide appropriate services to all eligible
17 infants, children and their families under the act of December
18 19, 1990 (P.L.1372, No.212), known as the Early Intervention
19 Services System Act.

20 "Health care facility." A hospital providing clinically
21 related health services for obstetrical and newborn care, or a
22 birth center. The term includes a hospital providing clinically
23 related health services for obstetrical and newborn care, or a
24 birth center operated by an agency, the State or local
25 government. The term does not include an office used primarily
26 for private or group practice by health care practitioners if no
27 reviewable clinically related health services are offered.

28 "Infant." A child 30 days of age up to 24 months of age.

29 "Newborn." A child up to and including 29 days of age.

30 "Parent." A natural parent, stepparent, adoptive parent,

1 legal guardian or legal custodian of a child.

2 "Program." The Infant Vision Information, Education and
3 Wellness Program.

4 "Secretary." The Secretary of Health of the Commonwealth.
5 Section 4. The Newborn Vision Screening Advisory Committee.

6 (a) Membership.--The secretary shall appoint a six-member
7 Newborn Vision Screening Advisory Committee within the
8 department. The committee shall:

9 (1) Advise and make recommendations on issues relating
10 to the following:

11 (i) Program regulation and administration.

12 (ii) Diagnostic testing.

13 (iii) Technical support.

14 (iv) Follow-up.

15 (2) Be comprised of members with experience with infant
16 eye pathology, pediatric ophthalmology, optometry and common
17 vision screening and assessment tests.

18 (b) Compensation.--Members shall serve without compensation
19 but may be reimbursed for necessary travel and other expenses in
20 accordance with applicable law and regulations.

21 (c) Protocol.--On or before June 30, 2016, the department
22 shall adopt the protocol developed by the American Academy of
23 Pediatrics to optimally detect the presence of treatable causes
24 of blindness in infants by two months of age. If a protocol is
25 not developed on or before June 30, 2016, the department, in
26 consultation with the committee, shall establish a protocol to
27 optimally detect the presence of treatable causes of blindness
28 in infants by two months of age on or before January 1, 2017.

29 Section 5. Newborn vision screening education and assessment.

30 (a) Establishment.--The department shall establish the

1 Infant Vision Information, Education and Wellness Program,
2 consisting of the following components:

3 (1) A system to screen each newborn in this Commonwealth
4 for vision abnormalities before leaving a hospital.

5 (2) A system to screen each newborn who is not born in a
6 hospital within the first 30 days of life.

7 (3) A system to provide information and instruction to
8 the parents of each newborn and infant on the merits of
9 having vision screening performed and receiving follow-up
10 care.

11 (b) Program administration.--The department shall, in
12 cooperation with the committee, provide technical support,
13 including ophthalmological, optometric and administrative
14 technical support, to the health care facilities and individuals
15 implementing the requirements of subsection (a).

16 (c) Refusal of test.--Screening shall not be required if a
17 parent of the newborn or infant objects to the screening for any
18 reason. The refusal must be documented in writing, made a part
19 of the medical record of the newborn or infant and reported to
20 the department in a manner prescribed by the department.

21 (d) Implementation.--The program shall be implemented as
22 follows:

23 (1) By July 1, 2017, newborn and infant vision screening
24 shall be conducted on each live birth in health care
25 facilities in this Commonwealth during birth admissions using
26 procedures recommended by the department's advisory
27 committee, except as provided in subsection (c). If a newborn
28 is born in a location other than a hospital, the parents must
29 be instructed on the merits of having the vision screening
30 performed and given information to assist the parents in

1 having the screening performed within 30 days of the
2 newborn's birth. The department shall determine the
3 appropriate screening venue for a newborn born outside a
4 hospital.

5 (2) If the number of newborns and infants receiving
6 vision screening does not equal at least 85% of the total
7 number of live births in this Commonwealth on July 1, 2017,
8 as shown in the most recent data collected by the department
9 or falls below 85% annually after July 1, 2017, the
10 department in consultation with the advisory committee shall
11 immediately promulgate regulations to implement a State-
12 administered vision screening program.

13 (3) By July 1, 2016, each health care facility in this
14 Commonwealth shall provide information and instruct the
15 parents of newborns and infants concerning the importance of
16 screening the vision of newborns and infants and of receiving
17 follow-up care. The information shall be as follows:

18 (i) An informational pamphlet developed and supplied
19 by the department shall explain in lay terms all of the
20 following:

21 (A) The importance and process of vision
22 screening.

23 (B) The likelihood of a newborn or infant having
24 vision abnormalities.

25 (C) Follow-up procedures and available early
26 intervention services.

27 (D) A description of the normal vision
28 developmental process in children.

29 (ii) The information under subparagraph (i) shall
30 not preclude the health care facility from providing

1 additional material.

2 (iii) The information may not be considered a
3 substitute for the vision screening.

4 (4) By July 1, 2016, every hospital in this Commonwealth
5 shall report to the department, in a manner prescribed by the
6 department, the number of newborns and infants screened and
7 the results of the screening. The department, based on the
8 information, shall report to the General Assembly by January
9 1, 2017, and every January 1 thereafter, the following:

10 (i) The number of hospitals conducting vision
11 screenings during birth admissions.

12 (ii) The number of live births in hospitals.

13 (iii) The number of newborns screened during birth
14 admissions.

15 (iv) The number of live births in a location other
16 than a hospital.

17 (v) The number of newborns born in a location other
18 than a hospital who were screened within 30 days of the
19 date of birth.

20 (vi) The number of newborns born in a hospital who
21 passed and the number who did not pass the birth
22 admission screening, if administered.

23 (vii) The number of newborns born in a location
24 other than a hospital who passed and the number who did
25 not pass a screening within 30 days of the date of birth,
26 if administered.

27 (viii) The number of infants who returned for
28 follow-up rescreening.

29 (ix) The number of infants who passed the follow-up
30 rescreening.

1 (x) The number of infants recommended for
2 monitoring, intervention and follow-up care.

3 Section 6. Reporting and referral.

4 (a) Duties.--The department shall implement a reporting and
5 referral system that links vision screening, if necessary, with
6 optometric and ophthalmologist services and other early
7 intervention services. The Commonwealth may do all the
8 following:

9 (1) Identify 100% of newborns and infants with vision
10 abnormalities within 30 days of the date of birth.

11 (2) Provide timely assessment if indicated.

12 (3) Provide appropriate referral for treatment and
13 intervention before the age of six months.

14 (b) Program administration.--The department shall, in
15 consultation with the committee, provide administrative
16 technical support to the facilities implementing the reporting
17 and early intervention referral system under this section.

18 (c) Implementation.--The department, in consultation with
19 the committee, shall issue temporary guidelines by July 1, 2016,
20 implementing a reporting and early intervention referral system
21 for newborns, infants and children who have been recommended for
22 further assessment. The temporary guidelines shall expire on
23 June 30, 2017, or upon promulgation of regulations under section
24 8, whichever occurs first.

25 Section 7. Confidentiality of records.

26 (a) Limitations.--A person, employee or agent of a person
27 who obtains information under this act may not disclose the
28 information except to the parent of the infant or child or to
29 the department for statistical recordkeeping or for appropriate
30 treatment referral and early intervention services.

1 (b) Confidentiality.--

2 (1) Data obtained directly from the medical records of a
3 patient shall be considered confidential and shall be for the
4 confidential use of the department in maintaining the
5 tracking system and in providing appropriate services. The
6 information shall be privileged and may not be divulged or
7 made public in any manner that discloses the identity of the
8 patient. Information considered confidential under this
9 paragraph shall be exempt from access under the act of
10 February 14, 2008 (P.L.6, No.3), known as the Right-to-Know
11 Law.

12 (2) Anonymous statistical information collected under
13 the tracking system shall be considered a public record under
14 the Right-to-Know Law.

15 (c) Good faith.--A person who acts in good faith in
16 complying with this section by reporting newborn and infant
17 vision screening results to the department may not be held
18 civilly or criminally liable for furnishing the information
19 required by this act.

20 Section 8. Regulations.

21 The department shall promulgate regulations to implement the
22 provisions of this act.

23 Section 9. Effective date.

24 This act shall take effect in 90 days.