

PUBLIC HEALTH CODE (EXCERPT)
Act 368 of 1978

333.5430 Newborn screening quality assurance advisory committee; membership; appointment; screening tests; annual review of list; report; recommendations; approval or rejection by legislature.

Sec. 5430.

(1) The newborn screening quality assurance advisory committee is created in the department. The newborn screening quality assurance advisory committee shall consist of 10 members and be appointed by the department as follows:

- (a) One individual representing a Michigan nonprofit health care corporation.
- (b) One individual representing the Michigan health and hospital association.
- (c) One individual representing the Michigan state medical society.
- (d) One individual representing the Michigan osteopathic association.
- (e) One individual representing the department's medical services administration.
- (f) One individual representing the department's public health administration.
- (g) One individual who is a neonatologist with experience and background in newborn screening.
- (h) One individual representing health maintenance organizations.
- (i) Two individuals representing the general public.

(2) The newborn screening quality assurance advisory committee shall meet annually to review the list of newborn screening tests required under section 5431 and under department rules, regulations, and guidelines. The newborn screening quality assurance advisory committee shall, on an annual basis, submit a written report to the department regarding the appropriateness of the existing list of required newborn screening tests. The newborn screening quality assurance advisory committee shall also include in the report recommendations to revise the list to include additional newborn screening tests that are nationally recognized in the scientific literature or national standards for conditions that can be ameliorated or treated if identified by a newborn screening test and to remove certain tests that are no longer supported in the scientific literature or national standard as being effective for ameliorating or treating conditions that can be identified by newborn screening.

(3) The newborn screening quality assurance advisory committee shall conduct a financial review of any recommended changes to the list of newborn screening tests and shall include in the written report required under subsection (2) a recommendation for the increase or decrease in the amount charged pursuant to section 5431 for newborn screening tests. The recommended change shall not exceed any net change in the amount of the actual cost of any proposed additional tests and follow-up minus savings from any proposed deleted tests and follow-up.

(4) Within 30 days after the department has received the report required under subsection (2), the department may approve or reject the recommendations of the newborn screening quality assurance advisory committee. If the department does not reject the recommendations or fails to act within the 30 days, then the recommendations shall be forwarded to the standing committees in the senate and house of representatives that consider issues pertaining to public health for approval.

(5) Within 45 days after the recommendations are forwarded and received, the legislature shall approve or reject those recommendations without amendment by concurrent resolution adopted by both standing committees of the senate and house of representatives that consider issues pertaining to public health and both houses of the legislature by recorded vote. If the proposed recommendations are not submitted on a legislative session day, the 45 days commence on the first legislative session day after the recommendations are submitted. The 45 days shall include not less than 9 legislative session days. If the recommendations are not rejected within the 45-day period, the recommendations shall be considered approved, shall be adopted by the department, and shall take effect 6 months after the recommendations are adopted by both houses of the legislature or considered approved as provided under this subsection.

History: Add. 2006, Act 31, Imd. Eff. Feb. 23, 2006

Compiler's Notes: For transfer of powers and duties of the medical services administration to the health and aging services administration created within the department of health and human services; and abolishment of the medical services administration, see E.R.O. No. 2021-2, compiled at MCL 400.562.

Popular Name: Act 368