

HOUSE AMENDMENTS TO HOUSE BILL 2685

By COMMITTEE ON BEHAVIORAL HEALTH AND HEALTH CARE

April 7

- 1 On page 2 of the printed bill, delete lines 32 through 35.
- 2 In line 36, delete “(d)” and insert “(c)”.
- 3 On page 3, line 2, delete “and after a newborn is discharged from the hospital or birth
4 center”.
- 5 Delete lines 10 through 45.
- 6 On page 4, delete lines 1 through 35 and insert:
- 7 **“SECTION 2.** ORS 433.321, as amended by section 1 of this 2025 Act, is amended to read:
- 8 “433.321. (1) In all Oregon hospitals and birthing centers where more than 200 live births occur
9 per year, each newborn child must receive a newborn hearing screening test. A hospital or birthing
10 center shall attempt to conduct the test required under this subsection prior to the discharge of the
11 newborn child from the facility.
- 12 “(2) All Oregon hospitals and birthing centers where fewer than 200 live births occur per year
13 shall provide the parent or guardian of a newborn child with the appropriate information furnished
14 by the Oregon Health Authority concerning the importance of newborn hearing screening tests.
- 15 “(3) All Oregon hospitals and birthing centers conducting newborn hearing screening tests,
16 within 10 days of conducting a newborn hearing screening test, shall:
- 17 “(a) Notify the parent or guardian and the health care provider of the newborn child of the test
18 results;
- 19 “(b) Provide the parent or guardian with names and contact information for diagnostic facilities
20 that conduct newborn hearing screening tests in the community and with materials developed pur-
21 suant to ORS 433.298; and
- 22 “(c) Report to the authority the results of the test for the newborn child and information iden-
23 tifying the newborn child.
- 24 “(4) A diagnostic facility conducting newborn hearing screening tests, within 10 days of con-
25 ducting a newborn hearing screening test, shall report to the authority the results of the test for
26 the newborn child and information identifying the newborn child. If a diagnostic facility conducting
27 newborn hearing screening tests detects hearing loss in a newborn child, the diagnostic facility shall
28 provide to the parent or guardian materials developed pursuant to ORS 433.298.
- 29 “(5) Each public and private educational institution that provides early intervention services as
30 defined in ORS 343.035 shall disclose to the authority information identifying the children referred
31 to the educational institution with diagnosed hearing loss and the enrollment status of the children.
32 The institution may disclose to the authority additional information regarding children with hearing
33 loss who are receiving early intervention services if the educational institution has obtained consent
34 to disclose the information.
- 35 “(6) The authority shall, on an annual basis, provide to all Oregon hospitals and birthing centers

1 the following information:

2 “(a) A description of the responsibilities created by this section;

3 “(b) A list of appropriate screening devices and descriptions of training protocols to ensure that
4 staff members are adequately trained in the use of hearing screening equipment;

5 “(c) A list of diagnostic facilities that conduct newborn hearing screening tests;

6 “(d) Using evidence-based best practice standards, a recommended schedule for conducting
7 newborn hearing screening tests;

8 “[*(e)* An expanded targeted screening protocol to identify newborns that should receive testing for
9 cytomegalovirus within 14 days of birth and prior to discharge from the hospital or birthing center;]

10 “[*(f)*] (e) A recommended protocol for infant and early childhood diagnostic testing and care
11 following a positive screening result for cytomegalovirus;

12 “[*(g)*] (f) A list of public and private educational institutions that provide early intervention
13 services and a description of the geographic area served by each institution; and

14 “[*(h)*] (g) Other information related to newborn hearing screening tests or cytomegalovirus that
15 the authority deems appropriate.

16 “[*(7)(a)* If a newborn has a positive screening result for cytomegalovirus, the hospital or birthing
17 center shall notify the parent or guardian and the health care provider of the newborn.]

18 “[*(b)* A health benefit plan, as defined in ORS 743B.005, shall provide payment, coverage or re-
19 imbursement for the cost of cytomegalovirus testing conducted in accordance with the expanded targeted
20 screening protocol adopted by the authority under this section.]

21 “[*(c)* The authority shall adopt rules to establish the expanded targeted screening protocol for
22 cytomegalovirus described in this section based on symptoms that could be attributed to
23 cytomegalovirus, using evidence-based best practices and standards.]

24 “[*(8)(a)* Except as provided in paragraph (b) or (c) of this subsection, all hospitals and birthing
25 centers shall comply with the screening protocol established by the department under subsection (7) of
26 this section.]

27 “[*(b)* A hospital or birthing center is exempt from conducting newborn screening for
28 cytomegalovirus under this section if the parent or guardian of the newborn objects to the testing in
29 writing.]

30 “[*(c)* A hospital or birthing center in a health maintenance organization, as defined in ORS
31 750.005, shall conduct newborn screening for cytomegalovirus under this section within 14 days of
32 birth.]

33 “[*(9)*] (7) A hospital or birthing center described in subsection (1) of this section is exempt from
34 providing newborn hearing screening tests if the parent or guardian of the newborn child objects
35 to the testing procedure on the grounds that the procedure conflicts with the religious tenets and
36 practices of the parent or guardian. The parent or guardian must sign a statement that the newborn
37 child is being reared in accordance with those religious tenets and practices.

38 “[*(10)*] (8) A newborn child may not be refused the procedure described in subsection (1) of this
39 section because of an inability of the parent or guardian to pay for the procedure.”.

40 On page 5, delete lines 23 through 28 and insert:

41 “**SECTION 5. No later than January 1, 2026, the Oregon Health Authority shall establish**
42 **by rule the expanded targeted screening protocol for cytomegalovirus described in ORS**
43 **433.321 (7)(c), as amended by section 1 of this 2025 Act.”.**