



Ohio Legislative Service Commission

Bill Analysis

Elizabeth Molnar

H.B. 315

130th General Assembly
(As Introduced)

Rep. Wachtmann

BILL SUMMARY

- Requires maternity units, newborn care nurseries, and maternity homes to report to the Ohio Department of Health the number of newborns diagnosed with neonatal abstinence syndrome.

CONTENT AND OPERATION

Reporting newborns with neonatal abstinence syndrome

The bill requires that each maternity unit, newborn care nursery, and maternity home report to the Ohio Department of Health (ODH) the number of newborns diagnosed with neonatal abstinence syndrome or another similar condition indicating drug addiction or dependence who were born to residents of this state during the preceding calendar quarter. The information must be reported not later than 30 days after the end of each quarter.¹

ODH is responsible for licensing maternity units, newborn care nurseries, and maternity homes. A maternity unit is a distinct portion of a hospital in which inpatient care is provided to women during all or part of the maternity cycle and a newborn care nursery is a distinct portion of a hospital in which inpatient care, including intensive care, is provided to infants. A maternity home is a facility for pregnant girls and women where accommodations, medical care, and social services are provided during the prenatal and postpartal periods.²

¹ R.C. 3711.30(A).

² R.C. 3711.01.

Should a maternity unit, newborn care nursery, or maternity home fail to comply with the bill's requirements, ODH may revoke or suspend its license or impose a fine provided for by current law.³

Reporting procedures

The bill requires that the Director of ODH prescribe a form for reports made under the bill and procedures for their submission and collection. The form must not request or include patient-identifying information for any newborn or mother. ODH must compile and summarize the information submitted and make a report of the information available to the public not later than 90 days after the end of each calendar year.

The bill authorizes the Director to adopt rules in accordance with the Administrative Procedure Act (R.C. Chapter 119.) as necessary to administer the bill's requirements.⁴

Neonatal abstinence syndrome

Neonatal abstinence syndrome (NAS) occurs in newborn babies exposed to addictive drugs while in utero. When a pregnant woman takes addictive illegal or prescription drugs, these substances pass through the placenta to the baby. The baby may become addicted along with the pregnant woman. At birth, the newborn may still be dependent on the addictive drug. Because the newborn is no longer receiving the drug, withdrawal symptoms may occur. Symptoms can begin within one to three days after birth, but may take five to ten days to appear.⁵

NAS symptoms may include any of the following: (1) blotchy skin coloring, (2) diarrhea, (3) excessive crying or high-pitched crying, (4) excessive sucking, (5) fever, (6) hyperactive reflexes, (7) increased muscle tone, (8) irritability, (9) poor feeding, (10) rapid breathing, (11) seizures, (12) sleep problems, (13) slow weight gain, (14) stuffy nose and sneezing, (15) sweating, (16) trembling or tremors, and (17) vomiting.

Several tests may be done to diagnose NAS, including a toxicology screen of bowel movements, urine test, and use of the NAS scoring system. The scoring system assigns points based on each symptom and its severity. The score can help a health care provider determine an appropriate treatment.

³ R.C. 3711.14, not in the bill.

⁴ R.C. 3711.30(B) and (C).

⁵ U.S. National Library of Medicine, National Institutes of Health, *Neonatal Abstinence Syndrome* (last visited October 25, 2013), available at <www.nlm.nih.gov/medlineplus/ency/article/007313.htm>.

HISTORY

ACTION

DATE

Introduced

10-24-13

H0315-I-130.docx/ks

