

SENATE BILL 495

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By: Senator Hettleman

Introduced and read first time: February 2, 2026

Assigned to: Finance

A BILL ENTITLED

1 AN ACT concerning

2 **Health – Newborn Screening Program – Gaucher Disease**

3 FOR the purpose of requiring the Maryland Department of Health, as part of the newborn
4 screening system, to screen for Gaucher disease; and generally relating to newborn
5 screening.

6 BY repealing and reenacting, with amendments,

7 Article – Health – General

8 Section 13–111

9 Annotated Code of Maryland

10 (2023 Replacement Volume and 2025 Supplement)

11 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,

12 That the Laws of Maryland read as follows:

13 **Article – Health – General**

14 13–111.

15 (a) The Department shall establish a coordinated statewide system for screening
16 all newborn infants in the State for certain hereditary and congenital disorders associated
17 with severe problems of health or development, except when the parent or guardian of the
18 newborn infant objects.

19 (b) Except as provided in § 13–112 of this subtitle, the Department’s public health
20 laboratory is the sole laboratory authorized to perform tests on specimens from newborn
21 infants collected to screen for hereditary and congenital disorders as determined under
22 subsection (d)(2) of this section.

23 (c) The system for newborn screening shall include:

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 (1) Laboratory testing and the reporting of test results; and

2 (2) Follow-up activities to facilitate the rapid identification and treatment
3 of an affected child.

4 (d) In consultation with the State Advisory Council on Hereditary and Congenital
5 Disorders, the Department shall:

6 (1) Establish protocols for a health care provider to obtain and deliver test
7 specimens to the Department's public health laboratory;

8 (2) Determine the screening tests that the Department's public health
9 laboratory is required to perform;

10 (3) Maintain a coordinated statewide system for newborn screening that
11 carries out the purpose described in subsection (c) of this section that includes:

12 (i) Communicating the results of screening tests to the health care
13 provider of the newborn infant;

14 (ii) Locating newborn infants with abnormal test results;

15 (iii) Sharing newborn screening information between hospitals,
16 health care providers, treatment centers, and laboratory personnel;

17 (iv) Delivering needed clinical, diagnostic, and treatment
18 information to health care providers, parents, and caregivers; and

19 (v) Notifying parents and guardians of newborn infants that
20 laboratories other than the Department's public health laboratory are authorized to
21 perform postscreening confirmatory or diagnostic tests on newborn infants for hereditary
22 and congenital disorders; and

23 (4) Adopt regulations that set forth the standards and requirements for
24 newborn screening for hereditary and congenital disorders that are required under this
25 subtitle, including:

26 (i) Performing newborn screening tests;

27 (ii) Coordinating the reporting, follow-up, and treatment activities
28 with parents, caregivers, and health care providers; and

29 (iii) Establishing fees for newborn screening that do not exceed an
30 amount sufficient to cover the administrative, laboratory, and follow-up costs associated
31 with the performance of screening tests under this subtitle.

1 (e) (1) (i) The Department shall screen for each core condition listed in the
2 U.S. Department of Health and Human Services' Recommended Uniform Screening Panel.

3 (ii) Subject to subparagraph (iii) of this paragraph, the Department
4 shall implement testing for a core condition within 1 year and 6 months after the core
5 condition is added to the Recommended Uniform Screening Panel.

6 (iii) 1. If the Department is unable to implement testing within 1
7 year and 6 months after a core condition is added to the Recommended Uniform Screening
8 Panel due to a delay in the procurement of equipment or supplies needed to implement the
9 testing, the Department shall report to the Senate Finance Committee and the House
10 Health and Government Operations Committee, in accordance with § 2–1257 of the State
11 Government Article, within 1 year and 3 months after the addition of the core condition to
12 the Recommended Uniform Screening Panel and every 3 months thereafter until the
13 testing for the core condition is implemented.

14 2. A report required under subsubparagraph 1 of this
15 subparagraph shall include the reason for the delay and the anticipated timeline for
16 implementation.

17 (2) Notwithstanding any other provision of law, if the Secretary of Health
18 and Human Services issues federal recommendations on critical congenital heart disease
19 screening of newborns, the Department shall adopt the federal screening recommendations.

20 (3) The Department may screen for any condition recommended by the
21 Advisory Council and approved by the Secretary.

22 **(4) THE DEPARTMENT SHALL SCREEN FOR GAUCHER DISEASE.**

23 (f) (1) The Secretary shall pay all fees collected under the provisions of this
24 subtitle to the Comptroller.

25 (2) The Comptroller shall distribute the fees to the Newborn Screening
26 Program Fund established under § 13–113 of this subtitle.

27 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
28 October 1, 2026.