

## **BILL ANALYSIS**

Senate Research Center  
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S.B. 1128  
By: Zaffirini  
Health & Human Services  
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As Filed

### **AUTHOR'S / SPONSOR'S STATEMENT OF INTENT**

S.B. 1128 seeks to reduce the instances of newborns born with congenital syphilis, a potentially deadly infection, that can be treated easily at low costs. Texas has seen a rising trend of congenital syphilis during the last several years. An infected mother can pass the infection to her baby either in utero or during birth. According to the United States Centers for Disease Control and Prevention, if left untreated congenital syphilis can lead to stillbirth, neonatal death, or infant disorders such as deafness, neurologic impairment, and bone deformities.

When congenital syphilis is diagnosed before the fetus is born, it is easily treatable with antibiotics. If a newborn is born with congenital syphilis, however, the severe consequences of the infection leave the family with much higher medical costs.

S.B. 1128 aligns syphilis testing during pregnancy with testing requirements for HIV, requiring syphilis testing during the first and third trimesters of pregnancy.

As proposed, S.B. 1128 amends current law relating to certain diagnostic testing during pregnancy.

### **RULEMAKING AUTHORITY**

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

### **SECTION BY SECTION ANALYSIS**

SECTION 1. Amends Sections 81.090(a-1), (c), (c-1), and (c-2), Health and Safety Code, as follows:

(a-1) Adds a sample for syphilis infection to the samples a physician or other person permitted by law to attend a pregnant woman during gestation or at delivery of an infant is required to submit to an appropriately certified laboratory for a diagnostic test approved by the United States Food and Drug Administration (FDA).

(c) Deletes existing text requiring a physician or other person in attendance at a delivery to submit a sample for syphilis to an appropriately certified laboratory for diagnostic testing approved by the FDA and makes a nonsubstantive change.

(c-1) Requires the physician or other person in attendance at the delivery, if the physician or other person does not find in the woman's medical records results from the diagnostic test for syphilis and HIV infection performed under Subsection (a-1), to submit the sample to an appropriately certified laboratory for diagnostic testing approved by the FDA for syphilis and HIV infection. Makes no further change to this subsection.

(c-2) Requires the physician or other person in attendance at the delivery, if the physician or other person in attendance at the delivery does not find in the woman's medical records results from a diagnostic test for syphilis and HIV infection performed under Subsection (a-1), and the diagnostic test for syphilis infection was not performed before delivery under Subsection (c-1), to submit the sample to an appropriately certified

laboratory for a diagnostic test approved by the FDA for syphilis and HIV infection.  
Makes no further change to this subsection.

SECTION 2. Makes application of Sections 81.090(a-1), (c), (c-1), and (c-2), Health and Safety Code, as amended by this Act, prospective.

SECTION 3. Effective date: September 1, 2015.