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LAW/RWH

P.L.2013, CHAPTER 90, *approved August 7, 2013*  
Senate, No. 2137 (*First Reprint*)

1 AN ACT concerning screening for adrenoleukodystrophy in  
2 newborn infants and supplementing Title 26 of the Revised  
3 Statutes

4

5 **BE IT ENACTED** by the Senate and General Assembly of the State  
6 of New Jersey:

7

8 1. a. All infants born in this State shall be tested for  
9 adrenoleukodystrophy (ALD) beginning six months following the  
10 occurrence of all of the following:

11 (1) the development of a reliable <sup>1</sup>**methodology** test or series  
12 of tests<sup>1</sup> for screening newborns for ALD using dried blood  
13 spots<sup>1</sup>**,**<sup>1</sup> and quality assurance testing methodology for <sup>1</sup>**the test**  
14 ALD testing<sup>1</sup>;

15 (2) <sup>1</sup>**the** registration with the federal Food and Drug  
16 Administration of any reagents necessary for the test;

17 (3)<sup>1</sup> the availability <sup>1</sup>of quality assurance materials for the  
18 ALD test<sup>1</sup> from the federal Centers for Disease Control and  
19 Prevention <sup>1</sup>**of any necessary reagents**<sup>1</sup>; <sup>1</sup>**and**

20 (3) the inclusion of newborn screening for ALD in the  
21 Recommended Uniform Screening Panel of the United States  
22 Secretary of Health and Human Services' Advisory Committee on  
23 Heritable Disorders in Newborns and Children, after the  
24 committee's evidence review of newborn screening for ALD;<sup>1</sup>

25 (4) <sup>1</sup>**the** acquisition by the Department of Health and Senior  
26 Services of <sup>1</sup>the review by the Department of Health of the  
27 proposed test; and

28 (5)<sup>1</sup> the <sup>1</sup>acquisition of<sup>1</sup> equipment necessary to implement the  
29 expanded screening tests <sup>1</sup>by the State's Newborn Screening  
30 Laboratory.<sup>1</sup>

31 b. The Department of Health <sup>1</sup>**and Senior Services**<sup>1</sup> may  
32 charge a reasonable fee <sup>1</sup>and any reasonable increase in this fee as  
33 necessary,<sup>1</sup> for the test performed pursuant to this section. The  
34 amount of the fee and the procedures for collecting the fee shall be  
35 determined by the Commissioner of Health <sup>1</sup>**and Senior**  
36 **Services**<sup>1</sup>.

37

38 2. This act shall take effect immediately.

**EXPLANATION** – Matter enclosed in bold-faced brackets **[thus]** in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

<sup>1</sup>Senate SHH committee amendments adopted September 20, 2012.

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Provides for screening newborn infants for  
adrenoleukodystrophy.

**SENATE, No. 2137**

**STATE OF NEW JERSEY**  
**215th LEGISLATURE**

INTRODUCED JULY 26, 2012

**Sponsored by:**

**Senator STEPHEN M. SWEENEY**

**District 3 (Cumberland, Gloucester and Salem)**

**SYNOPSIS**

Provides for screening newborn infants for adrenoleukodystrophy.

**CURRENT VERSION OF TEXT**

As introduced.



S2137 SWEENEY

2

1 AN ACT concerning screening for adrenoleukodystrophy in  
2 newborn infants and supplementing Title 26 of the Revised  
3 Statutes

4

5 **BE IT ENACTED** by the Senate and General Assembly of the State  
6 of New Jersey:

7

8 1. a. All infants born in this State shall be tested for  
9 adrenoleukodystrophy (ALD) beginning six months following the  
10 occurrence of all of the following:

11 (1) the development of a reliable methodology for screening  
12 newborns for ALD using dried blood spots, and quality assurance  
13 testing methodology for the test;

14 (2) the registration with the federal Food and Drug  
15 Administration of any reagents necessary for the test;

16 (3) the availability from the federal Centers for Disease Control  
17 and Prevention of any necessary reagents; and

18 (4) the acquisition by the Department of Health and Senior  
19 Services of the equipment necessary to implement the expanded  
20 screening tests.

21 b. The Department of Health and Senior Services may charge a  
22 reasonable fee for the test performed pursuant to this section. The  
23 amount of the fee and the procedures for collecting the fee shall be  
24 determined by the Commissioner of Health and Senior Services.

25

26 2. This act shall take effect immediately.

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STATEMENT

30

31 This bill requires that infants born in the State be screened for  
32 adrenoleukodystrophy (ALD) beginning six months following the  
33 occurrence of all of the following: (1) the development of a reliable  
34 methodology for screening newborns for ALD using dried blood  
35 spots, and quality assurance testing methodology for the test; (2) the  
36 registration with the federal Food and Drug Administration of any  
37 necessary reagents; (3) the availability of the necessary reagents  
38 from the federal Centers for Disease Control and Prevention; and  
39 (4) the acquisition by the Department of Health and Senior Services  
40 (DHSS) of the equipment necessary to implement the expanded  
41 screening tests. The bill also authorizes DHSS to charge a  
42 reasonable fee for the testing.

43 Adrenoleukodystrophy is a rare, inherited disorder that can lead  
44 to damage to the brain and adrenal glands, and in its most  
45 aggressive form can lead to death in two to five years after the age  
46 of onset. ALD affects between one in 15,000 and one in 20,000  
47 children worldwide. Recent research has shown promising results  
48 in the development of a newborn screening test for ALD, but a

1 widely accepted methodology is not yet available. Although there  
2 is no cure for ALD, several treatments, including dietary treatments  
3 combined with Lorenzo's oil and bone transplantation have been  
4 used with some success, but treatments are most effective before or  
5 shortly after the onset of symptoms. Early detection of the disease  
6 may help affected individuals to seek treatment sooner, thereby  
7 possibly delaying the onset of symptoms and slowing their  
8 progression.

SENATE HEALTH, HUMAN SERVICES AND SENIOR CITIZENS  
COMMITTEE

STATEMENT TO

**SENATE, No. 2137**

with committee amendments

**STATE OF NEW JERSEY**

DATED: SEPTEMBER 20, 2012

The Senate Health, Human Services and Senior Citizens Committee reports favorably and with amendments Senate Bill No. 2137.

As amended by the committee, this bill requires that infants born in the State be screened for adrenoleukodystrophy (ALD) beginning six months following the occurrence of all of the following:

- the development of a reliable test or series of tests and quality assurance testing methodology for ALD testing;
- the availability of quality assurance materials for the test from the federal Centers for Disease Control and Prevention;
- the inclusion of ALD in the Recommended Uniform Screening Panel of the federal Advisory Committee on Heritable Disorders in Newborns and Children, following its evidence review;
- the review of the proposed test by the Department of Health; and
- the acquisition of equipment necessary to implement the expanded screening tests has been acquired by the State's Newborn Screening Laboratory.

The bill also authorizes the Department of Health to charge a reasonable fee for testing and any reasonable increase as necessary.

The committee amendments clarify that screening for ALD is to be conditioned upon the development of reliable testing based on accepted methodologies, the availability of quality assurance materials for the test from the federal Centers for Disease Control and Prevention, inclusion of ALD in the Recommended Uniform Screening Panel of the federal Advisory Committee on Heritable Disorders in Newborns and Children, the review of the proposed test by the Department of Health, and the acquisition of equipment necessary to implement the test by the State's Newborn Screening Laboratory. The amendments also provide that the Department of Health may charge any reasonable increased fees for this test as necessary, and update statutory references to the Department of Health to conform to current law.



# LEGISLATIVE FISCAL ESTIMATE

[First Reprint]

## SENATE, No. 2137 STATE OF NEW JERSEY 215th LEGISLATURE

DATED: JANUARY 14, 2013

### SUMMARY

**Synopsis:** Provides for screening newborn infants for adrenoleukodystrophy.

**Type of Impact:** Minimal or no impact.

**Agencies Affected:** Department of Health.

#### Office of Legislative Services Estimate

<b>Fiscal Impact</b>	<b><u>Years 1-3</u></b>
<b>State Cost</b>	Minimal or no impact – See comments below
<b>State Revenue</b>	Minimal or no impact – See comments below

- The bill will likely have no impact for several years, as a newborn screening test for ALD is not currently available.

### BILL DESCRIPTION

Senate Bill No. 2137 (1R) of 2012 requires that infants born in the State be screened for adrenoleukodystrophy (ALD) beginning six months after the occurrence of all of the following:

- the development of a reliable test or series of tests and quality assurance testing methodology for ALD testing;
- the availability of quality assurance materials for the test from the federal Centers for Disease Control and Prevention;
- the inclusion of ALD in the Recommended Uniform Screening Panel of the federal Advisory Committee on Heritable Disorders in Newborns and Children, following the committee's evidence review;
- the review of the proposed test by the Department of Health; and
- the acquisition of equipment necessary to implement the ALD screening test by the State's Newborn Screening Laboratory.

The bill also authorizes the Department of Health to charge a reasonable fee for testing and any reasonable increase as necessary.

## **FISCAL ANALYSIS**

### ***EXECUTIVE BRANCH***

None received.

### ***OFFICE OF LEGISLATIVE SERVICES***

It is not likely that the criteria set forth in the bill will be met for several years, so the bill will not be implemented during that period. Researchers at the Kennedy Krieger Institute have developed a newborn screening method to detect ALD, which is currently being tested in a large pilot study at the Mayo Biochemical Genetics Laboratory. Further research and development will be required before the test will meet the conditions set forth in the bill.

Even if the conditions regarding development and availability of a test are met, the bill effectively grants the Department of Health an option not to add the ALD test to the newborn screening panel if it chooses not to review the test or acquire the necessary equipment. The bill does not provide any new authority, as current law provides the Commissioner of Health with the authority to add additional tests to the newborn screening panel.

If a test for ALD is added to the newborn screening panel State costs may increase, but these costs cannot be determined without knowledge of what such a test would entail. Currently, the Newborn Screening Program screens the approximately 110,000 children born in this State each year for a panel of 54 disorders. Any additional costs could be offset by increasing the charge, currently \$90, which the Department of Health levies on hospitals for each newborn screening panel. If the test can be conducted using the same blood sample that is used for other newborn screening tests, it is likely that additional costs would be minimal.

*Section:* Human Services

*Analyst:* David Drescher  
Assistant Fiscal Analyst

*Approved:* David J. Rosen  
Legislative Budget and Finance Officer

This legislative fiscal estimate has been produced by the Office of Legislative Services due to the failure of the Executive Branch to respond to our request for a fiscal note.

This fiscal estimate has been prepared pursuant to P.L.1980, c.67 (C.52:13B-6 et seq.).

# SENATE BUDGET AND APPROPRIATIONS COMMITTEE

## STATEMENT TO

[First Reprint]

**SENATE, No. 2137**

# **STATE OF NEW JERSEY**

DATED: JANUARY 14, 2013

The Senate Budget and Appropriations Committee reports favorably Senate Bill No. 2137 (1R).

This bill requires that infants born in the State be screened for adrenoleukodystrophy (ALD) beginning six months following the occurrence of all of the following:

- the development of a reliable test or series of tests and quality assurance testing methodology for ALD testing;
- the availability of quality assurance materials for the test from the federal Centers for Disease Control and Prevention;
- the inclusion of ALD in the Recommended Uniform Screening Panel of the federal Advisory Committee on Heritable Disorders in Newborns and Children, following its evidence review;
- the review of the proposed test by the Department of Health; and
- the acquisition of equipment necessary to implement the expanded screening tests has been acquired by the State's Newborn Screening Laboratory.

The bill also authorizes the Department of Health to charge a reasonable fee for testing and any reasonable increase as necessary.

### FISCAL IMPACT:

The Office of Legislative Services notes that it is not likely that the criteria set forth in the bill will be met for several years, so the bill will not be implemented during that period. Researchers at the Kennedy Krieger Institute have developed a newborn screening method to detect ALD, which is currently being tested in a large pilot study at the Mayo Biochemical Genetics Laboratory. Further research and development will be required before the test will meet the conditions set forth in the bill.

Even if the conditions regarding development and availability of a test are met, the bill effectively grants the Department of Health an option not to add the ALD test to the newborn screening panel if it chooses not to review the test or acquire the necessary equipment. The bill does not provide any new authority, as current law provides the Commissioner of Health with the authority to add additional tests to the newborn screening panel.

If a test for ALD is added to the newborn screening panel State costs may increase, but these costs cannot be determined without knowledge of what such a test would entail. Currently, the Newborn Screening Program screens the approximately 110,000 children born in this State each year for a panel of 54 disorders. Any additional costs could be offset by increasing the charge, currently \$90, which the Department of Health levies on hospitals for each newborn screening panel. If the test can be conducted using the same blood sample that is used for other newborn screening tests, it is likely that additional costs would be minimal.

# ASSEMBLY APPROPRIATIONS COMMITTEE

## STATEMENT TO

[First Reprint]

**SENATE, No. 2137**

# **STATE OF NEW JERSEY**

DATED: JUNE 6, 2013

The Assembly Appropriations Committee reports favorably Senate Bill No. 2137 (1R).

The bill requires that all infants born in the State be tested for adrenoleukodystrophy (ALD), a rare genetically determined neurological disorder that affects the brain with demyelination and causes neurological deficits.

The bill provides that the testing of infants for ALD is required to begin six months after the occurrence of each of the following:

- the development of a reliable test or series of tests and quality assurance testing methodology for ALD testing;
- the availability of quality assurance materials for the test from the federal Centers for Disease Control and Prevention;
- the inclusion of ALD in the Recommended Uniform Screening Panel of the federal Advisory Committee on Heritable Disorders in Newborns and Children, following its evidence review;
- the review of the proposed test by the Department of Health; and
- the acquisition of equipment necessary to implement the expanded screening tests by the State's Newborn Screening Laboratory.

The bill authorizes the Department of Health to charge a reasonable fee for the required ALD testing, allows for reasonable increases in the fee, and permits the Commissioner of Health to determine the amount of the fee and the procedures for its collection.

The bill takes effect immediately upon enactment.

As reported, this bill is identical to Assembly Bill No. 3272 (1R), as also reported by the committee.

### FISCAL IMPACT:

The Office of Legislative Services (OLS) expects the bill to have no fiscal impact to the State for several years until a reliable newborn screening test for ALD is developed and made readily available. Researchers have developed a newborn screening method to detect ALD (and are currently testing the method), but further research and development is needed before the test will meet each of the conditions established by the bill.

The OLS notes that even if the conditions regarding the development and availability of a test are met, the bill effectively grants the Department of Health an option not to add the ALD test to the newborn screening panel if it chooses not to review the test or acquire the necessary equipment. The bill does not provide any new authority, as current law authorizes the Commissioner of Health to add additional tests to the newborn screening panel.

The OLS notes that if a test for ALD is added to the newborn screening panel, State costs may increase, but these costs cannot be determined without knowing what a test entails. The Newborn Screening Program currently screens the approximately 110,000 children born in this State each year for a panel of 54 disorders. The additional costs could be offset by increasing the current \$90 charge imposed on hospitals for each newborn screening panel. If the test is conducted using the same blood sample used for other newborn screening tests, it is likely that the additional costs will be minimal.

# ASSEMBLY, No. 3272

## STATE OF NEW JERSEY 215th LEGISLATURE

INTRODUCED SEPTEMBER 27, 2012

**Sponsored by:**

**Assemblyman JASON O'DONNELL**

**District 31 (Hudson)**

**Assemblyman PATRICK J. DIEGNAN, JR.**

**District 18 (Middlesex)**

**Assemblyman TROY SINGLETON**

**District 7 (Burlington)**

**SYNOPSIS**

Provides for screening newborn infants for adrenoleukodystrophy.

**CURRENT VERSION OF TEXT**

As introduced.



**(Sponsorship Updated As Of: 10/19/2012)**

1 AN ACT concerning screening for adrenoleukodystrophy in  
2 newborn infants and supplementing Title 26 of the Revised  
3 Statutes

4

5 **BE IT ENACTED** by the Senate and General Assembly of the State  
6 of New Jersey:

7

8 1. a. All infants born in this State shall be tested for  
9 adrenoleukodystrophy (ALD) beginning six months following the  
10 occurrence of all of the following:

11 (1) the development of a reliable methodology for screening  
12 newborns for ALD using dried blood spots and quality assurance  
13 testing methodology for the test;

14 (2) the registration with the federal Food and Drug  
15 Administration of any reagents necessary for the test;

16 (3) the availability from the federal Centers for Disease Control  
17 and Prevention of any necessary reagents; and

18 (4) the acquisition by the Department of Health of the  
19 equipment necessary to implement the expanded screening tests.

20 b. The Department of Health may charge a reasonable fee for  
21 the test performed pursuant to this section. The amount of the fee  
22 and the procedures for collecting the fee shall be determined by the  
23 Commissioner of Health.

24

25 2. This act shall take effect immediately.

26

27

28 STATEMENT

29

30 This bill requires that infants born in the State be screened for  
31 adrenoleukodystrophy (ALD) beginning six months following the  
32 occurrence of all of the following: (1) the development of a reliable  
33 methodology for screening newborns for ALD using dried blood  
34 spots, and quality assurance testing methodology for the test; (2) the  
35 registration with the federal Food and Drug Administration of any  
36 necessary reagents; (3) the availability of the necessary reagents  
37 from the federal Centers for Disease Control and Prevention; and  
38 (4) the acquisition by the Department of Health (DOH) of the  
39 equipment necessary to implement the expanded screening tests.  
40 The bill also authorizes DOH to charge a reasonable fee for the  
41 testing.

42 Adrenoleukodystrophy is a rare, inherited disorder that can lead  
43 to damage to the brain and adrenal glands, and in its most  
44 aggressive form can lead to death in two to five years after the age  
45 of onset. ALD affects between one in 15,000 and one in 20,000  
46 children worldwide. Recent research has shown promising results  
47 in the development of a newborn screening test for ALD, but a  
48 widely accepted methodology is not yet available. Although there  
49 is no cure for ALD, several treatments, including dietary treatments



1 combined with Lorenzo's oil and bone transplantation, have been  
2 used with some success, but treatments are most effective before or  
3 shortly after the onset of symptoms. Early detection of the disease  
4 may help affected individuals to seek treatment sooner, thereby  
5 possibly delaying the onset of symptoms and slowing their  
6 progression.

# ASSEMBLY HEALTH AND SENIOR SERVICES COMMITTEE

## STATEMENT TO

### **ASSEMBLY, No. 3272**

with committee amendments

# **STATE OF NEW JERSEY**

DATED: FEBRUARY 7, 2013

The Assembly Health and Senior Services Committee reports favorably and with amendments Assembly Bill No. 3272.

As amended by the committee, this bill requires that infants born in the State be screened for adrenoleukodystrophy (ALD) beginning six months following the occurrence of all of the following:

- the development of a reliable test or series of tests and quality assurance testing methodology for ALD testing;
- the availability of quality assurance materials for the test from the federal Centers for Disease Control and Prevention;
- the inclusion of ALD in the Recommended Uniform Screening Panel of the federal Advisory Committee on Heritable Disorders in Newborns and Children, following its evidence review;
- the review of the proposed test by the Department of Health; and
- the acquisition of equipment necessary to implement the expanded screening tests by the State's Newborn Screening Laboratory.

The bill also authorizes the Department of Health to charge a reasonable fee for testing and any reasonable increase as necessary.

#### COMMITTEE AMENDMENTS

The committee amendments clarify that screening for ALD is to be conditioned upon the development of reliable testing based on accepted methodologies, the availability of quality assurance materials for the test from the federal Centers for Disease Control and Prevention, inclusion of ALD in the Recommended Uniform Screening Panel of the federal Advisory Committee on Heritable Disorders in Newborns and Children, the review of the proposed test by the Department of Health, and the acquisition of equipment necessary to implement the test by the State's Newborn Screening Laboratory. The amendments also provide that the Department of Health may charge any reasonable increased fees for this test as necessary, and update statutory references to the Department of Health to conform to current law.

# ASSEMBLY APPROPRIATIONS COMMITTEE

## STATEMENT TO

[First Reprint]

**ASSEMBLY, No. 3272**

# **STATE OF NEW JERSEY**

DATED: JUNE 6, 2013

The Assembly Appropriations Committee reports favorably Assembly Bill No. 3272 (1R).

The bill requires that all infants born in the State be tested for adrenoleukodystrophy (ALD), a rare genetically determined neurological disorder that affects the brain with demyelination and causes neurological deficits.

The bill provides that the testing of infants for ALD is required to begin six months after the occurrence of each of the following:

- the development of a reliable test or series of tests and quality assurance testing methodology for ALD testing;
- the availability of quality assurance materials for the test from the federal Centers for Disease Control and Prevention;
- the inclusion of ALD in the Recommended Uniform Screening Panel of the federal Advisory Committee on Heritable Disorders in Newborns and Children, following its evidence review;
- the review of the proposed test by the Department of Health; and
- the acquisition of equipment necessary to implement the expanded screening tests by the State's Newborn Screening Laboratory.

The bill authorizes the Department of Health to charge a reasonable fee for the required ALD testing, allows for reasonable increases in the fee, and permits the Commissioner of Health to determine the amount of the fee and the procedures for its collection.

The bill takes effect immediately upon enactment.

As reported, this bill is identical to Senate Bill No. 2137 (1R), as also reported by the committee.

### FISCAL IMPACT:

The Office of Legislative Services (OLS) expects the bill to have no fiscal impact to the State for several years until a reliable newborn screening test for ALD is developed and made readily available. Researchers have developed a newborn screening method to detect ALD (and are currently testing the method), but further research and development is needed before the test will meet each of the conditions established by the bill.

The OLS notes that even if the conditions regarding the development and availability of a test are met, the bill effectively grants the Department of Health an option not to add the ALD test to the newborn screening panel if it chooses not to review the test or acquire the necessary equipment. The bill does not provide any new authority, as current law authorizes the Commissioner of Health to add additional tests to the newborn screening panel.

The OLS notes that if a test for ALD is added to the newborn screening panel, State costs may increase, but these costs cannot be determined without knowing what a test entails. The Newborn Screening Program currently screens the approximately 110,000 children born in this State each year for a panel of 54 disorders. The additional costs could be offset by increasing the current \$90 charge imposed on hospitals for each newborn screening panel. If the test is conducted using the same blood sample used for other newborn screening tests, it is likely that the additional costs will be minimal.

# LEGISLATIVE FISCAL ESTIMATE

[First Reprint]

**ASSEMBLY, No. 3272**

## **STATE OF NEW JERSEY 215th LEGISLATURE**

DATED: JUNE 6, 2013

### **SUMMARY**

**Synopsis:** Provides for screening newborn infants for adrenoleukodystrophy.

**Type of Impact:** Minimal or no impact.

**Agencies Affected:** Department of Health.

### **Office of Legislative Services Estimate**

<b>Fiscal Impact</b>	<b><u>Years 1-3</u></b>
<b>State Cost</b>	Minimal or no impact – See comments below
<b>State Revenue</b>	Minimal or no impact – See comments below

- The bill will likely have no impact for several years, as a newborn screening test for adrenoleukodystrophy (ALD) is not currently available.

### **BILL DESCRIPTION**

Assembly Bill No. 3272 (1R) of 2012 requires that infants born in the State be screened for ALD beginning six months after the occurrence of all of the following:

- the development of a reliable test or series of tests and quality assurance testing methodology for ALD testing;
- the availability of quality assurance materials for the test from the federal Centers for Disease Control and Prevention;
- the inclusion of ALD in the Recommended Uniform Screening Panel of the federal Advisory Committee on Heritable Disorders in Newborns and Children, following the committee's evidence review;
- the review of the proposed test by the Department of Health; and
- the acquisition of equipment necessary to implement the ALD screening test by the State's Newborn Screening Laboratory.

The bill also authorizes the Department of Health to charge a reasonable fee for testing and any reasonable increase as necessary.

## FISCAL ANALYSIS

### *EXECUTIVE BRANCH*

None received.

### *OFFICE OF LEGISLATIVE SERVICES*

It is not likely that the criteria set forth in the bill will be met for several years, so the bill will not be implemented during that period. Researchers at the Kennedy Krieger Institute have developed a newborn screening method to detect ALD, which is currently being tested in a large pilot study at the Mayo Biochemical Genetics Laboratory. Further research and development will be required before the test will meet the conditions set forth in the bill.

Even if the conditions regarding development and availability of a test are met, the bill effectively grants the Department of Health an option not to add the ALD test to the newborn screening panel if it chooses not to review the test or acquire the necessary equipment. The bill does not provide any new authority, as current law provides the Commissioner of Health with the authority to add additional tests to the newborn screening panel.

If a test for ALD is added to the newborn screening panel State costs may increase, but these costs cannot be determined without knowledge of what such a test would entail. Currently, the Newborn Screening Program screens the approximately 110,000 children born in this State each year for a panel of 54 disorders. Any additional costs could be offset by increasing the charge, currently \$90, which the Department of Health levies on hospitals for each newborn screening panel. If the test can be conducted using the same blood sample that is used for other newborn screening tests, it is likely that additional costs would be minimal.

*Section: Human Services*

*Analyst: David Drescher  
Associate Fiscal Analyst*

*Approved: David J. Rosen  
Legislative Budget and Finance Officer*

This legislative fiscal estimate has been produced by the Office of Legislative Services due to the failure of the Executive Branch to respond to our request for a fiscal note.

This fiscal estimate has been prepared pursuant to P.L.1980, c.67 (C.52:13B-6 et seq.).