WASHINGTON STATE BOARD OF HEALTH

Date: November 19, 2025

To: Washington State Board of Health Members

From: Kelly Oshiro, Vice Chair

Subject: Newborn Screening Technical Advisory Committee Legislative Report: Review of Congenital Cytomegalovirus – Substitute Senate Bill 5829

Background and Summary:

Newborn Screening is a program within the Department of Health (Department) that tests all babies for rare but treatable conditions using a dried blood sample. Under RCW 70.83.050, the State Board of Health (Board) is responsible for establishing rules for the program. The Board's rules are set forth in chapter 246-650 WAC and include the list of conditions that all newborns must be screened for. The Board relies on a multi-disciplinary technical advisory committee (TAC) to evaluate candidate conditions using established screening criteria and make a recommendation to the Board.

During the 2024 legislative session, the Legislature passed Substitute Senate Bill 5829 (SSB 5829), directing the Board to re-review congenital cytomegalovirus (cCMV) for potential inclusion on Washington's mandatory newborn screening panel and to submit a legislative report with findings and recommendations by December 31, 2025.

In February and March 2025, a TAC reviewed cCMV. TAC members agreed on the seriousness of cCMV but were divided on whether universal screening is the most effective strategy. The TAC review found that:

- Bloodspot screening does not reliably prevent severe outcomes such as death or disability.
- The primary benefit of universal newborn screening for cCMV would be identifying infants at risk for late-onset decreases in hearing.
- Preventing CMV transmission during pregnancy is more effective at reducing fetal infection and adverse outcomes than universal newborn screening.
- Bloodspot testing is less accurate than other specimen types, such as dried urine filter paper, which is the most accurate method.

Since dried urine filter paper was the most accurate method, the Department conducted a cost-benefit analysis that focused on universal screening with this specimen type. The analysis findings highlighted the potential benefits of early detection, particularly for asymptomatic infants at risk of decreases in hearing. However, under current conditions, implementing universal cCMV screening using dried urine filter paper would result in a net societal cost in Washington State. Dried urine filter paper testing is currently not feasible within the state's existing infrastructure and the Board's statutory authority, which focuses on dried blood-spot testing.

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On April 9, 2025, the Board reviewed the TAC's findings and recommendations and voted not to add cCMV to the newborn screening panel. This decision was based on several factors, including:

- Limitations of bloodspot testing, which has lower sensitivity than other methods.
- Unproven treatment effectiveness in preventing death and disability.
- Infrastructure challenges for equitable access to services for audiological evaluation.
- The greater public health impact of focusing on cytomegalovirus (CMV) prevention during pregnancy rather than universal newborn screening.

The draft legislative report summarizes the TAC's findings, the Board's review, and the recommendation to not add cCMV to the newborn screening panel while continuing investments in prevention strategies to reduce prenatal CMV transmission.

I have invited Molly Dinardo, Board staff, and Megan McCrillis, Department staff, to briefly remind the Board of SSB 5829, cCMV, the TAC review process, and the final TAC and Board recommendations. This overview will take place before your discussion, feedback, and possible approval of the report.

Recommended Board Actions:

The Board may wish to consider and amend, if necessary, the following motion:

The Board approves the cCMV legislative report with any edits discussed during today's meeting and directs staff to finalize the report in consultation with the Chair and submit it to the Governor and appropriate legislative committees by December 31, 2025. The Board directs staff to send copies of the final report to TAC Members and other subject matter experts who participated in the review.

Staff

Molly Dinardo, Policy Advisor