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L.D. 1814

DATE: 3-23-00

(Filing No. H-931)

HEALTH AND HUMAN SERVICES

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STATE OF MAINE
HOUSE OF REPRESENTATIVES
119TH LEGISLATURE
SECOND REGULAR SESSION

COMMITTEE AMENDMENT "A" to H.P. 1260, L.D. 1814, Bill, "An Act Establishing the Newborn Hearing Program"

Amend the bill by striking out everything after section 1 and inserting in its place the following:

'Sec. 2. 22 MRSA c. 1686 is enacted to read:

CHAPTER 1686

NEWBORN HEARING PROGRAM

§8821. Newborn Hearing Program established

There is established within the department the Newborn Hearing Program, referred to in this chapter as the "program," to enable children and their families and caregivers to obtain information regarding hearing screening and evaluation and to learn about treatment and intervention services at the earliest opportunity in order to prevent or mitigate developmental delays and academic failures associated with undetected hearing loss. The obligations of the department regarding this program begin when funding is available to the department to implement the program.

§8822. Program requirements

1. Definitions. As used in this chapter, unless the context indicates otherwise, the following terms have the following meanings.

A. "Birth admission" means the time after birth that the newborn remains in the hospital nursery prior to discharge.

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2 B. "Board" means the Newborn Hearing Screening Advisory
3 Board.

4
5 C. "Hearing loss" means a hearing loss of 30 decibels or
6 more in the frequency region important for speech
7 recognition and comprehension in one or both ears. The
8 department may adopt rules to decrease the amount of
9 decibels of hearing loss as technology allows for detection
10 of hearing loss of 15 to 25 decibels in one or both ears.

11 D. "Intervention" or "treatment" means the early
12 intervention services described in the federal Individuals
13 with Disabilities Education Act, 20 United States Code,
14 Chapter 33, Subchapter III, Sections 1431 to 1445, as
15 amended. "Intervention" or "treatment" includes, but is not
16 limited to, audiological, medical or early educational
17 services that provide a choice of methods of communication
18 in a variety of sensory modalities.

19 E. "Parent" means a natural parent, stepparent, adoptive
20 parent, legal guardian or other legal custodian of a child.

21 F. "Person who is culturally deaf" means a person with
22 permanent hearing loss who identifies as a member of the
23 deaf community and who utilizes American Sign Language as
24 the primary mode of communication.

25 G. "Person who is hard-of-hearing" or "person who is deaf"
26 means a person with permanent hearing loss who communicates
27 using aural or oral skills for accessing spoken language.

28 **2. Information to parents of children born in hospitals.**

29 Beginning November 1, 2000, a hospital shall provide information
30 to the parents of children born in the hospital regarding the
31 importance of screening the hearing of newborns and of receiving
32 follow-up care. The information must explain the process of
33 hearing screening, the likelihood of a child having a hearing
34 loss, follow-up procedures and community resources and must
35 include a description of the normal auditory, speech and language
36 development process in children. The hospital must provide
37 information about hearing screening that may be provided at the
38 hospital or coordinated, scheduled or arranged for by the
39 hospital. The program must provide this information prior to
40 discharge from the birth admission to the hospital or within 3
41 months of discharge.

42 **3. Information to parents of children born outside of**
43 **hospitals.** By November 1, 2002, when a newborn is delivered in a
44 facility other than a hospital, the department shall provide
45 information to the parents on the merits of having the hearing
46 information to the parents on the merits of having the hearing

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2 screening performed and on the availability of the hearing
screening within 3 months of the date of birth.

4 4. Guidelines for services for children with hearing loss
and at-risk children. The department, after consultation with
6 the board, shall establish guidelines for the provision of
follow-up services for newborn children in the State who are
8 identified as having or being at risk of developing hearing
loss. These services must include, but are not limited to,
10 diagnostic audiologic assessment, counseling and educational
services for the parents and an explanation of the potential
12 effects of the identified hearing loss on the development of the
newborn's speech, language and cognitive skills as well as the
14 potential benefits of early identification and use of spoken or
sign language.

16 5. Reporting. Beginning January 1, 2003, every hospital
18 and other location providing birthing services shall report
annually to the department concerning the following:

20 A. The number of newborns born in the hospital or location,
22 the number screened at birth admission and the number of
newborns who passed and did not pass the screening;

24 B. The number of newborns and infants who participated in
26 follow-up rescreening at that hospital or location and the
number who passed the rescreening;

28 C. The number of newborns recommended for monitoring,
30 intervention and follow-up care;

32 D. The number of newborns and infants recommended for
diagnostic audiologic evaluation; and

34 E. The number of newborns whose parents declined screening.

36 6. Application. The requirements of this section apply to
38 all hospitals licensed under this Title and to other locations
providing birthing services.

40 **§8823. Newborn Hearing Screening Advisory Board**

42 The Newborn Hearing Screening Advisory Board, as established
44 in Title 5, section 12004-G, subsection 14-C, is created to
provide oversight and advice on the program. The department shall
46 provide administrative support services required by the board.

48 1. Duties. The board shall perform the following duties.

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- 2 A. The board shall oversee the program and advise the
3 commissioner on issues relating to the program and shall
4 recommend procedures for hearing screening, evaluation,
5 treatment and intervention services.
- 6 B. Beginning January 1, 2001, the board shall report each
7 year to the joint standing committees of the Legislature
8 having jurisdiction over health and human services matters
9 and education matters on the program, the percentages of
10 children being screened and evaluated and those children
11 being offered and receiving intervention and treatment
12 services. The report must be made available to the public.
- 14 2. Composition of board. The board consists of an odd
15 number of members, numbering at least 15, appointed by the
16 Governor, including but not limited to:
- 18 A. An audiologist, a physician, a speech-language
19 pathologist, a nurse, a certified teacher of the deaf and a
20 person who provides early intervention services to children
21 who are deaf or hard-of-hearing through the Governor Baxter
22 School for the Deaf;
- 24 B. A person who is culturally deaf, a person who is
25 hard-of-hearing or deaf, a parent of a child who is
26 culturally deaf, a parent of a child who is hard-of-hearing
27 or deaf and a parent of a hearing child; and
- 28 C. A representative of hospitals, a representative of
29 health carriers, a representative of the Child Development
30 Services System established in Title 20-A, section 7724 and
31 a representative of the department.
- 34 3. Reimbursement for expenses. Board members may be
35 reimbursed for reasonable and necessary expenses incurred to
36 attend board meetings but are not entitled to per diem payments.
- 38 4. Funding. The department shall provide financial and
39 staff support for the board. The department shall submit grant
40 proposals for funding the program to the Federal Government under
41 the federal Newborn and Infant Hearing Screening and Intervention
42 Act of 1999 and under 42 United States Code, Chapter 7,
43 Subchapter V.

44 **§8824. Tracking system**

46 The department is authorized to implement a tracking system
47 that provides the information necessary to effectively plan and
48 establish a comprehensive system of developmentally appropriate

services for newborn children and infants who are deaf or hard-of-hearing and to ensure that all families are given information regarding the availability of hearing screening for their infants. The services must be designed to reduce the likelihood of associated disabling conditions for these children. The tracking system must be integrated with any national database or similar system developed by the Federal Government.

1. **Mandatory reporting.** Once the tracking system is operating, all hospitals licensed in the State and other providers of services that have established hearing screening procedures for newborn children and infants up to 3 years of age shall report to the department all data on hearing screening of newborns and infants. Reports that are required under this subsection must be submitted at least monthly.

2. **Use of information.** Information collected in the tracking system is confidential health care information subject to section 1711-C. Parents must be provided information on the availability of resources and services for children with hearing loss, including those provided in accordance with the federal Individuals with Disabilities Education Act and departmental policy.

3. **Immunity.** Persons reporting information in good faith in compliance with this chapter are immune from civil liability.

§8825. Rulemaking

The department shall adopt rules as required to implement this chapter. Rules adopted pursuant to this section are routine technical rules as defined by Title 5, chapter 375, subchapter II-A.

Sec. 3. Allocation. The following funds are allocated from the Federal Expenditures Fund to carry out the purposes of this Act.

2000-01

HUMAN SERVICES, DEPARTMENT OF

Newborn Hearing Program

Positions - Legislative Count	(2,000)
Personal Services	\$62,074
All Other	\$31,500

Allocates funds for one Comprehensive Health Planner I position and one Clerk Typist II

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position and related operational costs to establish and implement the Newborn Hearing Program. The establishment of these positions is contingent upon the receipt of federal funds for this purpose.

**DEPARTMENT OF HUMAN SERVICES
TOTAL**

\$93,574'

Further amend the bill by inserting at the end before the summary the following:

FISCAL NOTE

2000-01

APPROPRIATIONS/ALLOCATIONS

Other Funds \$93,574

REVENUES

Other Funds \$93,574

This bill includes a Federal Expenditures Fund allocation of \$93,574 in fiscal year 2000-01 for the Department of Human Services to establish one Comprehensive Health Planner I position and one Clerk Typist II position to support the Newborn Hearing Program. The estimated future costs are approximately \$83,745 annually beginning in fiscal year 2001-02. The obligations of the Department of Human Services regarding the Newborn Hearing Program begin when federal funding becomes available to implement the program. The establishment of these positions is also contingent upon the receipt of federal funds.

The additional costs associated with establishing and supporting the Newborn Hearing Screening Advisory Board, adopting rules and establishing guidelines for the provision of services related to the Newborn Hearing Program can be absorbed by the Department of Human Services utilizing existing budgeted resources.'

SUMMARY

This amendment retains most of the provisions of the bill that establish the Newborn Hearing Program to provide hearing information on screening, evaluation, treatment and intervention to newborn children and to children within 3 months of the date

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2 of their birth. The program is within the Department of Human
Services with advice from the program by the Newborn Hearing
4 Screening Advisory Board. The amendment removes the requirement
that insurance and health maintenance organization contracts
6 provide coverage for newborn children hearing screening.

8 This amendment adds definition sections and expands the
membership of the Newborn Hearing Screening Advisory Board. This
10 amendment adds 2 positions that are contingent upon receipt of
federal funds. This amendment adds an allocation and a fiscal
note to the bill.

COMMITTEE AMENDMENT