
By: **Delegate Hixson**
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Assigned to: Environmental Matters

Committee Report: Favorable with amendments
House action: Adopted
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CHAPTER _____

1 AN ACT concerning

2 **Universal Hearing Loss Screenings - Newborns**

3 FOR the purpose of altering the ~~Program for Hearing Impaired Infants to include a~~
4 ~~certain universal newborn hearing screening component; requiring certain~~
5 ~~tracking, monitoring, and follow-up care; requiring certain reports on newborn~~
6 ~~hearing screening and follow-up care; composition of a certain Advisory Council;~~
7 requiring the Advisory Council to conduct a study on the feasibility of requiring
8 universal hearing screening on certain newborns; requiring the Department of
9 Health and Mental Hygiene to conduct a certain study and to make a certain
10 report by a certain date; and generally relating to universal newborn hearing
11 screening.

12 BY repealing and reenacting, with amendments,
13 Article - Health - General
14 Section ~~13-601 through 13-605~~ 13-603
15 Annotated Code of Maryland
16 (1994 Replacement Volume and 1997 Supplement)

17 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
18 MARYLAND, That the Laws of Maryland read as follows:

19 **Article - Health - General**

20 ~~13-601.~~

21 (a) ~~In this subtitle the following words have the meanings indicated.~~

1 (b) "Risk factor" includes any of the following factors that an infant may
 2 display and are considered relevant in determining the possibility of a hearing
 3 impairment:

4 (1) An admission for more than 48 hours to a neonatal intensive care
 5 nursery;

6 (2) An anatomical malformation that involves the head or neck,
 7 including:

8 (i) A dysmorphic appearance;

9 (ii) A morphologic abnormality of the pinna;

10 (iii) An overt or submucous cleft palate; and

11 (iv) Any syndromal or nonsyndromal abnormality;

12 (3) A severe asphyxia, including:

13 (i) An infant with an apgar score of 0-3 who fails to institute
 14 spontaneous respiration within 10 minutes; or

15 (ii) An infant with hypotonia that persists during the 1st 2 hours of
 16 the infant's life;

17 (4) A bacterial meningitis, especially H. influenza;

18 (5) A birth weight of less than 1500 grams;

19 (6) A congenital perinatal infection, including cytomegalovirus, herpes,
 20 rubella, syphilis, and toxoplasmosis;

21 (7) A family history of a childhood hearing impairment; and

22 (8) A hyperbilirubinemia at a level that exceeds indications for exchange
 23 transfusion.

24 (c) "Hearing-impaired infant" means an infant who has an impairment that
 25 is a dysfunction of the auditory system of any type or degree which is sufficient to
 26 interfere with the acquisition and development of speech and language skills with or
 27 without the use of sound amplification.

28 (d) "Infant" means a child who is under the age of 1 year.

29 (E) "NEWBORN" MEANS A CHILD UP TO 29 DAYS OLD WHO IS BORN IN OR
 30 RECEIVES CARE IN A HOSPITAL IN THE STATE.

31 [(e)] (F) "Program" means the program that the Secretary establishes to
 32 provide for the UNIVERSAL HEARING SCREENING OF NEWBORNS BORN OR
 33 RECEIVING CARE IN HOSPITALS IN THE STATE AND early identification and follow-up

1 of hearing impaired infants and infants who have a risk factor of developing a
2 hearing impairment.

3 ~~13-602.~~

4 (a) ~~The Secretary shall establish a program for the UNIVERSAL HEARING~~
5 ~~SCREENING OF NEWBORNS BORN IN HOSPITALS IN THE STATE AND~~ early
6 ~~identification and follow up of infants who have a risk factor for developing a hearing~~
7 ~~impairment.~~

8 (b) ~~The program shall be based on the model system developed by the~~
9 ~~Department.~~

10 (C) (1) ~~UNDER THE PROGRAM, NOT LATER THAN NOVEMBER 1, 1999,~~
11 ~~NEWBORN HEARING SCREENING SHALL BE CONDUCTED ON NO FEWER THAN 85% OF~~
12 ~~THE NEWBORNS BORN IN HOSPITALS IN THE STATE.~~

13 (2) ~~FOR A NEWBORN DELIVERED IN A FACILITY OR PLACE OTHER THAN~~
14 ~~A HOSPITAL, THE PARENTS SHALL BE:~~

15 (I) ~~INSTRUCTED ON THE BENEFITS OF HAVING THE HEARING~~
16 ~~SCREENING PERFORMED; AND~~

17 (II) ~~GIVEN INFORMATION TO ASSIST THEM IN HAVING THE~~
18 ~~HEARING SCREENING PERFORMED WITHIN 3 MONTHS OF THE CHILD'S BIRTH.~~

19 (3) ~~ON OR BEFORE NOVEMBER 1, 1998, EACH HOSPITAL IN THE STATE~~
20 ~~SHALL BEGIN EDUCATING PARENTS OF NEWBORNS ON THE IMPORTANCE OF~~
21 ~~HAVING NEWBORNS SCREENED FOR HEARING PROBLEMS AND RECEIVING~~
22 ~~FOLLOW UP CARE.~~

23 (4) ~~IF THE NUMBER OF NEWBORNS AND INFANTS SCREENED DOES NOT~~
24 ~~EQUAL OR EXCEED 85% OF THE TOTAL NUMBER OF NEWBORNS BORN IN THE STATE~~
25 ~~ON OR BEFORE NOVEMBER 1, 1999, OR FALLS BELOW 85% AT ANY TIME THEREAFTER,~~
26 ~~THE DEPARTMENT SHALL:~~

27 (I) ~~ADMINISTER THE SCREENING OF NEWBORNS AND INFANTS~~
28 ~~PURSUANT TO THIS SUBTITLE; AND~~

29 (II) ~~BE REIMBURSED FOR THESE SCREENINGS BY THE PARENTS'~~
30 ~~HEALTH INSURANCE POLICIES.~~

31 ~~13-603.~~

32 (a) There is an Advisory Council for the program.

33 (b) (1) The Advisory Council consists of ~~40~~ 14 members appointed by the
34 Secretary.

35 (2) Of the ~~40~~ 14 members:

- 1 (i) 1 shall be a physician;
- 2 (ii) 3 shall be from the field of education:
- 3 1. 1 shall be from the Maryland State Department of
4 Education;
- 5 2. 1 shall be from the Maryland School for the Deaf; and
- 6 3. 1 shall be an educator of the deaf from a local education
7 agency;
- 8 (iii) 1 shall be from the Maryland Department of Health and Mental
9 Hygiene;
- 10 (iv) 1 shall be a mental health professional with expertise in the
11 area of deafness;
- 12 (v) 2 shall be parents of hearing-impaired children;
- 13 (vi) 1 shall be from the Maryland Association of the Deaf; ~~and~~
- 14 (vii) 1 shall be an audiologist;
- 15 (VIII) 2 SHALL BE FROM THE HOSPITAL INDUSTRY;
- 16 (IX) 1 SHALL BE FROM THE INSURANCE INDUSTRY; AND
- 17 (X) 1 SHALL BE FROM THE ALEXANDER GRAHAM BELL
18 ASSOCIATION OF MARYLAND.

19 (c) The Advisory Council shall elect a chairperson from among its members.

20 (d) The Advisory Council shall meet at least 6 times a year at the times and
21 places that it determines.

22 (e) A member of the Advisory Council:

23 (1) May not receive compensation; but

24 (2) Is entitled to reimbursement for expenses under the Standard State
25 Travel Regulations, as provided in the State budget.

26 (f) The Advisory Council shall:

27 (1) Advise the Department on the implementation of ~~UNIVERSAL~~
28 ~~NEWBORN SCREENING AND~~ an early identification program and follow-up of
29 hearing-impaired ~~NEWBORNS AND~~ infants and infants who have a risk factor of
30 developing a hearing impairment;

- 1 (2) Provide consultation to the Department in the development of the
2 program;
- 3 (3) Make recommendations for operation of the program;
- 4 (4) Advise the Department:
- 5 (i) In setting standards for the program;
- 6 (ii) In monitoring and reviewing the program; and
- 7 (iii) In providing quality assurance for the program;
- 8 (5) Provide consultation to the Department in the establishment of an
9 educational program for families, professionals, and the public that can be integrated
10 with existing State and local education agency programs; and
- 11 (6) Review any materials the Department may distribute to the public
12 concerning hearing-impaired NEWBORNS AND infants.

13 (g) In consultation with the Advisory Council, the Department shall develop
14 guidelines for the operations of the Advisory Council.

15 ~~13-604.~~

16 (a) ~~The Secretary may contract with any qualified person to administer the~~
17 ~~program.~~

18 (b) ~~The Secretary shall:~~

19 (1) ~~Develop a system to gather and maintain data;~~

20 (2) ~~Develop methods TO:~~

21 (i) ~~[To contact] CONTACT parents or guardians of~~
22 ~~hearing impaired infants and infants who have a risk factor of developing a hearing~~
23 ~~impairment; [and]~~

24 (ii) ~~[To refer] REFER the parents or guardians to appropriate~~
25 ~~services; AND~~

26 (III) ~~CONTACT PARENTS OR GUARDIANS OF NEWBORNS REGARDING~~
27 ~~THE RESULTS OF THE NEWBORN HEARING SCREENING;~~

28 (3) ~~Establish a telephone hot line to communicate information about~~
29 ~~hearing impairment and services for hearing-impaired infants;~~

30 (4) ~~Appoint an Advisory Council for the program;~~

31 (5) ~~Meet annually with the Advisory Council; and~~

1 ~~(6)~~ In consultation with the Advisory Council, adopt rules and
2 regulations necessary to implement the program.

3 ~~13-605.~~

4 ~~(a)~~ A hospital shall prepare, on the form that the Secretary provides, a report
5 on each infant with a risk factor who is born alive in the hospital ~~AND EACH~~
6 ~~NEWBORN INFANT WHO IS SCREENED FOR HEARING PROBLEMS.~~ If an infant is born
7 outside the hospital, the person filling out the birth certificate shall make a report
8 under this section.

9 ~~(b)~~ ~~(1)~~ The Secretary shall determine the contents of the report required
10 under subsection ~~(a)~~ of this section.

11 ~~(2)~~ ~~WITH REGARD TO NEWBORNS, THE REPORT SHALL CONTAIN~~
12 ~~INFORMATION ABOUT THE NUMBER OF NEWBORNS SCREENED ON BIRTH~~
13 ~~ADMISSION, THE NUMBER WHO PASSED THE SCREENING, AND THE NUMBER WHO~~
14 ~~DID NOT PASS THE SCREENING.~~

15 ~~(3)~~ ~~THE REPORT ALSO SHOULD CONTAIN INFORMATION ABOUT THE~~
16 ~~NUMBER OF NEWBORNS WHO WERE RECOMMENDED FOR FOLLOW UP CARE, THE~~
17 ~~NUMBER WHO PASSED AND DID NOT PASS THE FOLLOW UP CARE SCREENING.~~

18 ~~(e)~~ The report shall be submitted to the Secretary.

19 SECTION 2. AND BE IT FURTHER ENACTED, That the Advisory Council
20 established under § 13-603 of the Health - General Article shall study and advise the
21 Department of Health and Mental Hygiene, on or before December 1, 1998, on the
22 feasibility of requiring universal hearing screening of newborns born in the State,
23 with consideration given to the appropriate method and mechanism to pay for the
24 costs of the screening, the appropriate personnel and setting to conduct the screening,
25 and the type and availability of the equipment necessary to conduct the screening.

26 SECTION 3. AND BE IT FURTHER ENACTED, That the Department of
27 Health and Mental Hygiene shall study the availability of any funds, including
28 federal, State, and local funds, and grants that may be utilized to assist hospitals and
29 health care providers in conducting an early identification program and follow-up
30 care of infants who have a risk factor of developing a hearing impairment. If a funding
31 option is found to be feasible, the Department shall take whatever steps are necessary
32 to directly apply for the funds or to educate all persons who may be eligible to receive
33 the funds on the existence of the funds. The Department shall report the results of its
34 study, including information on the type of funds available, the funds that the
35 Department applied for, and the success of receiving those funds, to the Maryland
36 Association of Maryland Hospitals and Health Systems, the House Environmental
37 Matters Committee, the Senate Finance Committee, and, in accordance with §
38 2-1246 of the State Government Article, the General Assembly on or before December
39 1, 1998.

40 ~~SECTION 2. 4.~~ AND BE IT FURTHER ENACTED, That this Act shall take
41 effect October 1, 1998.

