



February 23, 2026

**Bill: HB879/ SB502:Language Acquisition Tracking Program for Deaf and Hard of Hearing Children - Establishment**

**Position: FAVORABLE WITH AMENDMENTS**

Dear Chair, Vice-Chair, and Members of the Committee:

The Maryland Speech Language Hearing Association represents speech language pathologists and audiologists across Maryland. Collectively, we elevate and engage members to strive for excellence in serving those impacted by communication and related disorders through advocacy, equity, education, interprofessional collaboration, and leadership development.

MSHA's position on **HB879/SB502 is favorable** but does have concerns with certain language of the bill. We propose some considerations to the LEAD-K bill to ensure collaboration with committees that are already established in Maryland, such as The Maryland State Steering Committee for Deaf and Hard of Hearing Students, and professionals such as Speech Language Pathologists. These changes would make this bill similar to current LEAD-K bills being proposed in other states.

**In Support:**

MSHA is in support of the intent of HB 879/SB502 to monitor children who are Deaf or Hard of Hearing (D/HH) acquisition of language milestones. A strong language foundation is crucial for school readiness and academic success. Current systems, such as Maryland IEP online, do not allow providers to search and monitor the language development of all students who are Deaf or Hard of Hearing. There is no way to do a search unless the educational disability code of D/HH is documented. The current online IEP monitoring systems in Maryland also do not include students who are D/HH and on a 504, in general education, or in a private school setting. HB 879/SB502 will help support the monitoring of all students in Maryland who are D/HH who are under the age of nine.

Part of the goal of HB879/SB502 is to select language developmental milestones for children who are D/HH, select existing tools for educators to assess language and literacy development of children who are D/HH and develop parent resources. **MSHA is in support of the development of parent resources so families have all of the information they need to make the decision for their child.**

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## **Suggestions for Amendments:**

In the current proposed bill , on page 3 (C) (1) THE PROGRAM SHALL TRACK EACH ELIGIBLE CHILD’S LANGUAGE ACQUISITION USING THE LANGUAGE ASSESSMENT TOOL APPROVED BY THE ADVISORY COUNCIL. **MSHA proposes adding a line that during the tracking process, information about the child’s “language history” (i.e. the child’s language experiences) be noted in addition to their language modality (signed language, spoken language or both).**

Deaf and Hard of Hearing children often have complex language backgrounds where “modality” only tells us how a child communicates at one point in time but doesn’t tell us anything about the child’s language experiences up to that point. For example, a D/HH child whose modality gets coded in the data as “sign” might be a native signing child with age-appropriate fluency or a child who is only beginning to get ASL access after minimal meaningful access prior to that point. The problem with those two children being considered in the same category for modality is that children with the same preferred language can have vastly different histories of access to that language. Thinking about it from the perspective of a researcher who might look at the data, it’s not very helpful to know only how a child communicates at one time point for understanding why they might be falling behind. There’s a huge problem in previous language research on D/HH kids where all “sign language” children get put in the same group regardless of how long they’ve had access to it, and the same happens for all “spoken language” children. Those differences matter in the data tracking. MSHA recommends on page 3, after subparagraph II, a requirement for establishing a process to track the child’s language history based on the child’s parent or guardian report.

MSHA had been collaborating with The American Speech-Language Hearing Association (ASHA) the national professional, scientific, and credentialing association for over 200,000 members and affiliates who are audiologists; speech-language pathologist, speech, language, hearing scientist; audiology and speech-language pathology support personnel; and students about HB879/SB502. ASHA raised concerns with how HB879/SB502 will create a new position of State Coordinator of Language Acquisition for Deaf and Hard of Hearing Students. The addition of this Coordinator would be costly and burdensome. MSDE currently has the Maryland State Steering Committee for Deaf and Hard of Hearing Students. Providers with The Maryland State Steering Committee for Deaf and Hard of Hearing Students are well informed on educational concerns, IEPs, and IFSPs matters for Deaf and Hard of Hearing students. MSHA would suggest **amending** the current bill to **include a representative from The State Steering Committee for Deaf and Hard of Hearing Students.**

MSHA would also request the committee to consider **revising the bill to include a licensed Speech-Language Pathologist as one member of the Language Acquisition for Deaf and Hard of Hearing Children Advisory Council.** Speech language pathologists (SLPs) have the knowledge and expertise in the area of expressive/receptive language development.<sup>1</sup> SLPs collaborate with other professions to serve D/HH children with the same standard of care as their hearing peers while also acknowledging the unique language needs of D/HH children.

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Thank you for considering some of these amendments to help make HB879/SB502 a stronger bill. Family access to a variety of resources, establishing collaboration with qualified professionals who have shared knowledge and expertise about D/HH children, and putting in place a system to track not just the language development but also the language history of D/HH children will help support children who are D/HH develop the language foundation in whichever modality they prefer.

Thank you for your consideration,

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1. American Speech-Language-Hearing Association. (2004). *Roles of speech-language pathologists and teachers of children who are deaf and hard of hearing in the development of communicative and linguistic competence* [Position Statement]. <https://www.asha.org/policy/ps2004-00232/>

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