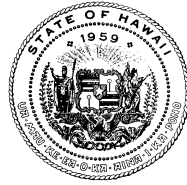


# SB 1243

Measure Title:	RELATING TO NEWBORN HEARING SCREENING.
Report Title:	Newborn Hearing Screening
Description:	Amends the Newborn Hearing Screening statute to mandate reporting of diagnostic audiologic evaluation results to improve hearing follow-up of infants and to update definitions and terminology.
Companion:	<a href="#">HB1017</a>
Package:	Governor
Current Referral:	CPH
Introducer(s):	KOUCHI (Introduced by request of another party)



**STATE OF HAWAII**  
**DEPARTMENT OF HEALTH**  
P. O. Box 3378  
Honolulu, HI 96801-3378  
doh.testimony@doh.hawaii.gov

**Testimony in SUPPORT of S.B. 1243**  
**RELATING TO NEWBORN HEARING SCREENING**

SENATOR ROSALYN H. BAKER, CHAIR  
SENATE COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH  
Hearing Date: February 20, 2019                      Room Number: 229

- 1    **Fiscal Implications:** There are no fiscal implications for the Department of Health (DOH).
  
- 2    **Department Testimony:** The Department of Health strongly supports S.B. 1243 which is part of  
3    the Governor's Administrative Package. This bill mandates the reporting of diagnostic  
4    audiologic evaluation results to improve identification and follow-up of infants who are deaf or  
5    hard of hearing. This issue is especially important since state data show that the incidence of  
6    infants who are born deaf or hard of hearing is about twice the incidence in other states.
  
- 7    Newborn hearing screening is mandated by Hawaii Revised Statutes §321-361 (2001) as a public  
8    health screening program that helps deaf or hard of hearing children reach their developmental  
9    milestones and be language ready for school. The national standards for early hearing detection  
10    and intervention are screening by 1 month of age, identification by 3 months, and enrollment in  
11    early intervention services by 6 months. Many studies have shown that the 1-3-6 goal results in  
12    children who have better vocabulary outcomes, reach their milestones at the right time, and are  
13    language ready for school.
  
- 14    In 2017, approximately 170 newborns did not pass newborn hearing screening. Without access to  
15    all the diagnostic audiologic evaluation results on these newborns, the DOH Newborn Hearing  
16    Screening Program (NHSP) does not know what happened to 44 (26%) of these newborns. This  
17    means that the NHSP does not know if it needs to follow-up with the families to facilitate  
18    diagnostic testing or entry into early intervention services, or just document that the newborn is  
19    not deaf or hard of hearing.

1 In addition, infants are not receiving timely evaluations. Of the 126/170 infants who received  
2 diagnostic audiologic evaluations, only 100 (57%) received an evaluation before 3 months of  
3 age. Timely and consistent reporting of diagnostic audiologic evaluation results will allow the  
4 program staff to identify, contact, and provide support to families of infants who need an  
5 evaluation before 3 months of age.

6 The missing diagnostic audiologic evaluation results also cause great delay for entry into much  
7 needed early intervention services for the infants who are deaf or hard of hearing. In 2017, 65  
8 infants were diagnosed with permanent hearing loss, but only 15/38 (39%) were enrolled in early  
9 intervention by 6 months of age. Timely reporting and referral to early intervention will increase  
10 the percentage of deaf and hard of hearing infants receiving appropriate early intervention  
11 services to develop oral and/or sign language communication.

12 Mandating the reporting of diagnostic audiologic evaluation results for the newborns who do not  
13 pass newborn hearing screening will help Hawaii meet the national 1-3-6 goal to help children  
14 who are deaf or hard of hearing be language ready for school.

15 Thank you for the opportunity to testify.

16 **Offered Amendments:** None

Testimony of  
John M. Kirimitsu  
Legal and Government Relations Consultant

Before:  
Senate Committee on Commerce, Consumer Protection, and Health  
The Honorable Rosalyn H. Baker, Chair  
The Honorable Stanley Chang, Vice Chair

February 20, 2019  
9:15 am  
Conference Room 229

### **SB 1243 Relating to Newborn Hearing Screening**

Chair, Vice Chair, and committee members, thank you for this opportunity to provide testimony on this measure amending the Statewide Newborn Hearing Screening Program to improve newborn hearing screening.

#### **Kaiser Permanente Hawaii would like to offer comments.**

Kaiser requests clarity on this bill's new reporting requirement mandating that audiologists and physician hearing specialists report "*diagnostic audiologic evaluation results*" of infants to the Department of Health. See Page 5, lines 7-10, of the bill. On its face, this bill would require audiologists and physicians to provide ALL infant testing results to the DOH, even those who are found to have normal hearing. This would require the submission of numerous detailed reports throughout the year, and even more concerning, the sharing of protected health information, which the parents may not want to share with the DOH.

Currently, Kaiser already provides the statutorily required screening results to the DOH for infants via HI-TRACK, a system that connects birthing facilities to the DOH screening database. For those who are found to have a hearing impairment, Kaiser's audiologists, and not the physicians, provide the testing results to the DOH after obtaining a release of information form signed by the parents.

Therefore, since birthing facilities are already statutorily required to provide infant screening testing results to the DOH (through the automated HI-TRACK database), and given the concerns that this new reporting requirement (by audiologists and physicians) would require the unnecessary submission of numerous detailed reporting of all testing results of infants (not only those who are found to be hearing impaired) and the unauthorized sharing confidential protected

health information (without the consent of the parents), Kaiser requests the following amendment:

Page 5, lines 7-10 deleted as follows:

**7** (d) ~~Audiologists and physicians specialized in hearing~~  
~~8 function performing diagnostic audiologic evaluations of infants~~  
~~9 shall report diagnostic audiologic evaluation results as~~  
~~10 determined by the department."~~

Thank you for your consideration.

**SB-1243**

Submitted on: 2/18/2019 9:19:46 PM

Testimony for CPH on 2/20/2019 9:15:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Melodie Aduja	Testifying for O`ahu County Committee on Legislative Priorities of the Democratic Party of Hawai`i	Support	No

Comments:

**SB-1243**

Submitted on: 2/15/2019 10:14:31 AM

Testimony for CPH on 2/20/2019 9:15:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Lynn Murakami-Akatsuka	Individual	Support	No

Comments:

Dear Committee,

I strongly support the passage of SB 1243 to amend the Newborn Hearing Screening statute which HB 1017 is a companion bill. This will enhance what is in the current law and to help our children an early start for intervention on one of our critical senses.

Thank you for the opportunity to testify in support of SB 1243.

Lynn Murakami-Akatsuka



## DISABILITY AND COMMUNICATION ACCESS BOARD

1010 Richards Street, Room 118 • Honolulu, Hawaii 96813  
Ph. (808) 586-8121 (V) • Fax (808) 586-8129 • TTY (808) 586-8162

**LATE**

February 20, 2019

### TESTIMONY TO THE SENATE COMMITTEE ON COMMERCE, CONSUMER PROTECTION AND HOUSING

#### Senate Bill 1243 - Relating to Newborn Hearing Screening

The Disability and Communication Access Board (DCAB) supports Senate Bill 1243, that amends the Newborn Hearing Screening statute to mandate reporting of diagnostic audiologic evaluation results to improve hearing follow-up of infants and to update definitions and terminology.

The sooner a parent is aware of hearing difficulties that their child has, the more advantageous it is for the child. Spoken language is learned through hearing and making appropriate responses for the child to develop some form of language. The child's hearing difficulties need to be identified and addressed as early as possible and this bill allows for early screening and evaluation to be conducted and for infants to be enrolled in early intervention services. Language development, whether it is spoken or signed, is critical factor in the child's ability to maximize socialization skills.

Thank you for the opportunity to testify.

Respectfully submitted,

*Francine Wai*

FRANCINE WAI  
Executive Director