



STATE OF HAWAII  
DEPARTMENT OF HEALTH  
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Honolulu, HI 96801-3378  
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**Testimony in SUPPORT of S.B. 2024  
RELATING TO NEWBORN HEARING SCREENING**

SENATOR JARRETT KEOHOKALOOLE, CHAIR  
SENATE COMMITTEE ON HEALTH

Hearing Date: 1/26/2022

Room Number: Via Videoconference

1 **Fiscal Implications:** There are no fiscal implications for the Department of Health (DOH).

2 **Department Testimony:** The Department **strongly supports** this measure to amend Hawaii  
3 Revised Statutes (HRS) §321-361 to 363 to mandate the reporting of diagnostic audiologic  
4 evaluation results of infants who do not pass the hearing screening test or are diagnosed as deaf  
5 or hard of hearing up to the age of three years.

6 This bill will improve the identification and follow-up of infants who are deaf or hard of hearing.  
7 The DOH Newborn Hearing Screening Program helps children who fail hearing screening to  
8 receive diagnostic testing and assists children who are deaf or hard of hearing in enrolling in  
9 early intervention services to support their development of oral and/or sign language  
10 communication. This is especially important since national data show that the incidence of  
11 infants who are born deaf or hard of hearing in Hawaii is at least twice the incidence in other  
12 states.

13 Newborn hearing screening is mandated by Hawaii Revised Statutes (HRS) §321-361 to 363  
14 (2001) as a public health screening program that helps deaf or hard of hearing children reach  
15 their developmental milestones and be language ready for school. The national standards for  
16 early hearing detection and intervention are screening by 1 month of age, identification by 3  
17 months, and enrollment in early intervention services by 6 months to support children in being  
18 language ready for school.

19 In 2020, 292 newborns did not pass newborn hearing screening. Without access to all the

1 diagnostic audiologic evaluation results on these newborns, NHSP does not know what happened  
2 to 98 (34%) of these newborns. The missing diagnostic audiologic evaluation results cause delay  
3 for entry into early intervention services for the infants who are deaf or hard of hearing. In 2020,  
4 51 infants were diagnosed with permanent hearing loss, but only 14 (27%) enrolled in early  
5 intervention by 6 months of age. Timely and consistent reporting of diagnostic audiologic  
6 evaluation results will allow the program staff to identify, contact, and provide support to  
7 families of infants who need an evaluation before 3 months of age. Timely reporting and referral  
8 to early intervention will increase the percentage of deaf and hard of hearing infants receiving  
9 timely services to develop oral and/or sign language communication.

10 Mandating the reporting of diagnostic audiologic evaluation results to the DOH for newborns  
11 who do not pass hearing screening will help Hawaii meet the national 1-3-6 goal to help children  
12 who are deaf or hard of hearing be language ready for school. Reporting of diagnostic results to  
13 NHSP is exempt from Health Insurance Portability and Accountability Act (HIPAA) regulations  
14 under the public health program provisions.

15 **Offered Amendments:** None

16 Thank you for the opportunity to testify on this measure.

Testimony of  
John M. Kirimitsu  
Legal and Government Relations Consultant

Before:  
Senate Committee on Health  
The Honorable Jarrett Keohokalole, Chair  
The Honorable Rosalyn H. Baker, Vice Chair

January 26, 2022  
1:00 pm  
Via Videoconference

### **SB 2024, Relating to Newborn Hearing Screening**

Chair, Vice Chair, and committee members, thank you for this opportunity to provide testimony on this measure requiring diagnostic audiologic results of newborn hearing screening to be provided to the DOH.

#### **Kaiser Permanente Hawaii supports this measure.**

Newborn hearing screening is required by Hawaii state law to identify hearing loss as soon as possible so that children can receive timely early intervention services. Hawaii has been a recognized national leader in implementing universal newborn hearing screening. In fact, Hawaii was one of the first states (along with Rhode Island) to implement a statewide newborn hearing screening program in which 95% or more of all newborns were screened.

Because of the need for prompt identification of and intervention for childhood hearing loss, universal newborn hearing screening programs currently operate in all U.S. states. With the federal government's help, every state has established an Early Hearing Detection and Intervention Program. As a result, about 98% of babies have their hearing screened before 1 month of age. NIH Publication No. 21-4968, October 2021.

Currently, Kaiser provides the statutorily required screening results of those infants who do not pass the hearing test to the DOH via HI-TRACK, a streamlined system that connects birthing facilities to the DOH screening database. Kaiser supports statewide efforts to screen newborns for hearing loss, coordinating hospital screening activities statewide, and maintaining statewide data on hearing screening results and follow-up.

Thank you for your consideration.



**STATE OF HAWAII**  
**Executive Office on Early Learning**  
2759 South King Street  
HONOLULU, HAWAII 96826

January 25, 2022

**TO:** Senator Jarrett Keohokalole, Chair  
Senator Rosalyn H. Baker, Vice Chair  
Senate Committee on Health

**FROM:** Coleen Momohara, Interim Director  
Executive Office on Early Learning

**SUBJECT:** **Measure:** S.B. No. 2024 – RELATING TO NEWBORN HEARING SCREENING  
**Hearing Date:** Wednesday January 26, 2022  
**Time:** 1:00 p.m.  
**Location:** Videoconference

**Bill Description:** Requires diagnostic audiological evaluation results of newborn hearing screening evaluations, or infants whose hearing status changes, to be provided to the department of health.

**EXECUTIVE OFFICE ON EARLY LEARNING'S POSITION: Support**

Good afternoon. I am Coleen Momohara, Interim Director of the Executive Office on Early Learning (EOEL). EOEL supports S.B. No. 2024 and defers to the Department of Health (DOH) as it relates to newborn hearing screening and reporting.

EOEL is statutorily responsible for the development of the State's early childhood system that shall ensure a spectrum of high-quality development and learning opportunities for children throughout the state, from prenatal care until the time they enter kindergarten, with priority given to underserved or at-risk children.

The Newborn Hearing Screening Program in Hawaii assists children under age 3 years of age who are deaf or hard of hearing in enrolling in early intervention services to support their development of oral and/or sign language communication. Early identification of children who are born deaf or hard of hearing is critical to ensure families have resources necessary to help their children acquire language, spoken and/or visual, and achieve age-appropriate communicative, cognitive, academic, social, and emotional development. According to the National Association of the Deaf, although nationally, about 95% of newborns have a hearing screening before they leave the hospital, children who are suspected of being deaf or hard of hearing may not receive necessary follow-up evaluations they need to confirm their hearing status. Furthermore, national data show that the incidences of infants who are born deaf or hard of hearing in Hawaii are at least twice the incidences in other states.

In 2019, the Department of Health reported that 183 of 250 infants received diagnostic audiological evaluations and only 25% of infants diagnosed with permanent hearing loss enrolled in early intervention by 6 months of age.

As we work to increase access to quality early learning opportunities for our keiki, early identification and treatment of hearing problems support children in their readiness for learning, school performance, and academic achievement. Timely and consistent diagnostic audiological evaluations and reporting of those evaluations will allow program staff to identify and provide the necessary support to families of infants who may be deaf or hard of hearing.

Thank you for the opportunity to provide testimony on this bill.

DAVID Y. IGE  
GOVERNOR OF HAWAII



ELIZABETH A. CHAR, M.D.  
DIRECTOR OF HEALTH

**STATE OF HAWAII**  
STATE COUNCIL  
ON DEVELOPMENTAL DISABILITIES  
PRINCESS VICTORIA KAMĀMALU BUILDING  
1010 RICHARDS STREET, Room 122  
HONOLULU, HAWAII 96813  
TELEPHONE (808) 586-8100 FAX (808) 586-7543  
January 26, 2022

The Honorable Senator Jarrett Keohokalole, Chair  
Senate Committee on Health  
The Thirty-First Legislature  
State Capitol  
State of Hawai'i  
Honolulu, Hawai'i 96813

Dear Senator Keohokalole and Committee Members:

SUBJECT: SB2024 Relating to Newborn Hearing Screening

The Hawaii State Council on Developmental Disabilities **STRONGLY SUPPORTS SB2024** which amends the newborn hearing screening statute to mandate reporting of diagnostic audiologic evaluation results to improve hearing follow-up of infants. Updates definitions and terminology.

Timely reporting and referral to early intervention will increase the percentage of deaf and hard of hearing infants receiving timely services to develop oral and/or sign language communication. Mandating the reporting of diagnostic audiologic evaluation results for newborns who do not pass hearing screening will help Hawaii meet the national 1-3-6 goal to help children who are deaf or hard of hearing be language ready for school.

The Council respectfully defers to the Department of Health for further guidance.

Thank you for the opportunity to submit testimony in **strong support of SB2024**.

Sincerely,

A handwritten signature in blue ink that reads "Daintry Bartoldus".

Daintry Bartoldus  
Executive Administrator

**SB-2024**

Submitted on: 1/25/2022 10:15:18 AM

Testimony for HTH on 1/26/2022 1:00:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Remote Testimony Requested</b>
Doug Imig	Testifying for Early Childhood Action Strategy	Support	No

Comments:



Hawai'i  
**Children's Action Network Speaks!**  
Building a unified voice for Hawai'i's children

To: Senator Keohokalole, Chair  
Senator Baker, Vice Chair  
Senate Committee on Health

Re: **SB 2024- Relating to Newborn Hearing Screening**  
1:00 PM, January 26, 2022

Chair Keohokalole, Vice Chair Baker, and committee members,

On behalf of HCAN Speaks!, thank you for the opportunity to **testify in support of Senate Bill 2024**, relating to newborn hearing screening.

Early identification of hearing loss is important to ensure children and their caregivers are provided the supports and care they need. Hawai'i has a high rate of infants who are born deaf or hard of hearing. The Hawaii rate (4/1000 births) is twice the rate in other states (2/1000). Senate Bill 2024 updates the definitions and terminology in the current HRS section, and it ensures that the appropriate data related to diagnostic audiologic evaluations are collected by Department of Health. Early diagnosis and referral to early intervention services will help children reach their developmental milestones and be ready to enter school with their peers. SB 2024 strengthens the current statute and in turn, strengthen the healthcare system for children.

Thank you for the opportunity to provide testimony in support of Senate Bill 2024.

Kathleen Algire  
Director of Early Learning and Health Policy



January 24, 2022

Committee on Health  
Honorable Jarrett Keohokalole, Chair  
Honorable , Rosalyn H. Baker, Vice Chair  
Tuesday, March 2, 2021, 11:00 AM

Support of SB 2024  
Relating to Newborn Hearing Screening

Dear Chair Keohokalole, Vice-Chair Baker and Members,

During my 40+ years of professional responsibilities in the field of vocational rehabilitation in California, Maryland and Hawaii, I have worked with Deaf, Hard of Hard of Hearing and Deaf-Blind adults in preparing for and obtaining gainful employment. It is my strong belief that early screening, identification and provision of aids, as needed, is critical to develop strong bonds within the family and access to the world around them.

Without exception, individuals with well-developed English language skills and their ability to think critically were the best candidates for academic success and independence.

I am writing to request your enthusiastic support for SB 2024.

Sincerely,

Eleanor E. Macdonald, M.Ed. CRC (ret.)