



Follow-up Profile to Failed Newborn Hearing Screenings Throughout the Country

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Background Information

- All 50 states have implemented newborn hearing screening (NBHS) programs to detect hearing loss in infants.
- The goals of the Early Hearing Detection and Identification (EHDI) program are to increase the number of newborns who are:
 - screened for hearing loss by 1 month of age
 - have a diagnostic audiologic evaluation by 3 months of age, and
 - receive appropriate intervention services by 6 months of age.
- According to the National EHDI Data on NBHS 97.9% of babies are screened at birth throughout the country
- Of those that are screened:
 - 1.8% do not pass their final or most recent newborn hearing screening
 - 70.8% are diagnosed as either having or not having a hearing loss before the age of 3 months.
- Detecting and treating hearing loss early helps to prevent delays in speech, language, and social development that may occur due to a hearing loss. Over time, such a delay can lead to significant educational and rehabilitation costs as well as learning difficulties.
- The National Center for Hearing Assessment and Management (NCHAM) reports that detecting and treating hearing loss at birth for one child saves \$400,000 in special education costs by the time that child graduates from high school.
- Screening programs are typically cost-effective and amount to approximately \$10-\$50 per baby, according to NCHAM.

Learning Objectives

- Gain an understanding regarding the rates of follow-up to failed newborn hearing screenings in various states throughout the country.
- Gain knowledge regarding laws, policies, and advisory committees in the states with the best rates of follow-up.
- Gain knowledge regarding differences and similarities in laws and insurance coverage for newborn hearing screenings in different states.
- Gain an understanding of various ways to improve follow-up to failed newborn hearing screenings and lower the number of infants lost to follow-up.

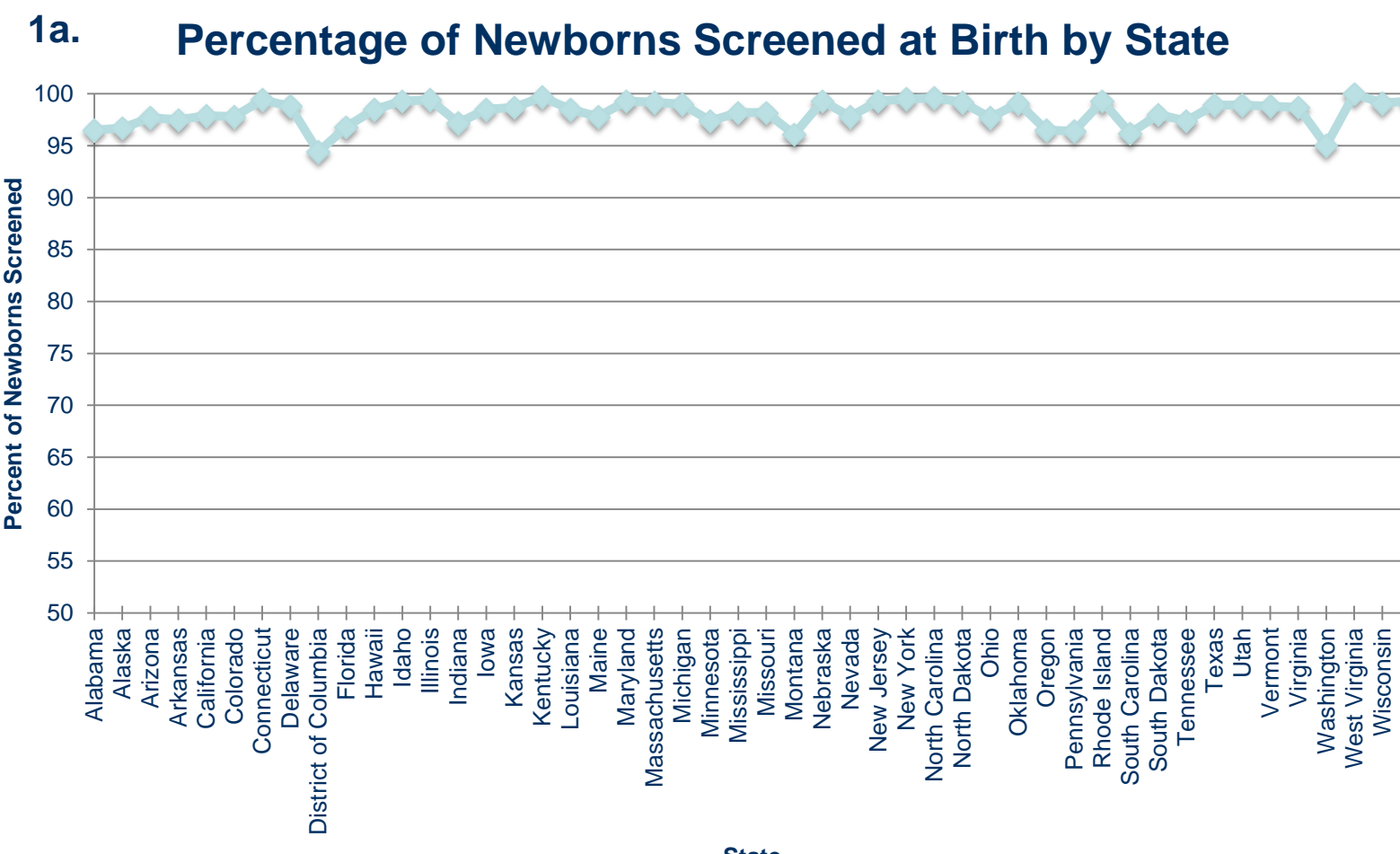


Figure 1a. Percentage of newborns screened at birth by state according to the 2011 Center for Disease Control (CDC) and Early Hearing Detection and Identification (EHDI) Hearing Screening & Follow-up Survey (HSFS). *Data for state of New Mexico not reported.

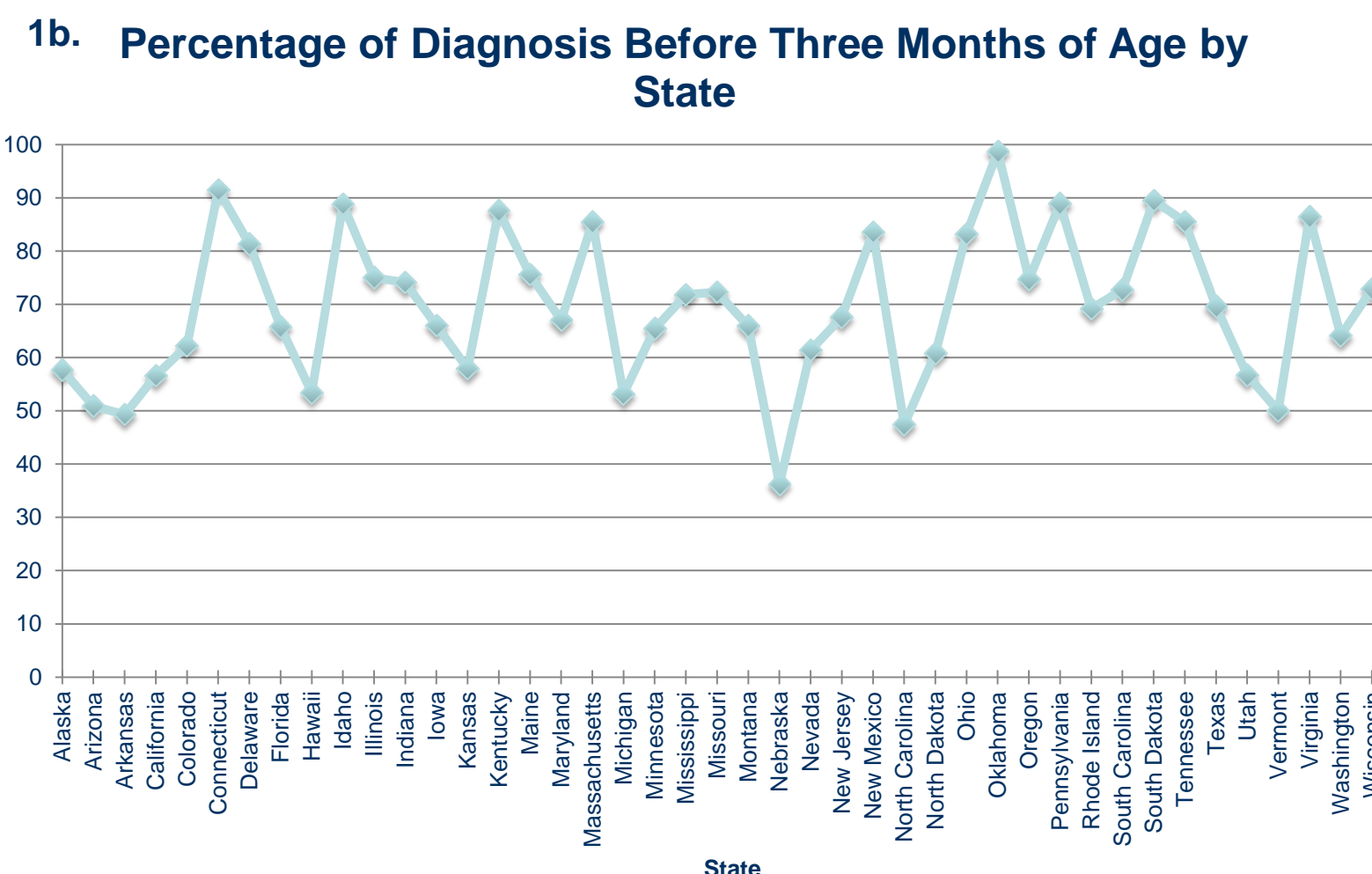


Figure 1b. Percentage of newborns diagnosed as either having or not having a hearing loss before three months of age, according to the 2011 Center for Disease Control (CDC) and Early Hearing Detection and Identification (EHDI) Hearing Screening & Follow-up Survey (HSFS). *Data for states of Louisiana and West Virginia not reported.

Task Force or Advisory Committee Employed by States with the Highest Percentage of Newborns Diagnosed as either Having or Not Having a Hearing Loss Before Three Months of Age

Ranking	State	Laws and Advisory Committees
1	Oklahoma	Requires State Board of Health to develop procedures and guidelines
2	Connecticut	Mechanism for compliance review
3	South Dakota	South Dakota Laws/Regulations do not require NBHS
4	Pennsylvania	Established Infant Hearing Education, Assessment, Reporting and Referral Program
5	Idaho	Idaho Sound Beginnings Program, which follows EHDI suggestions
6	Kentucky	Evaluation and Referral Commission
7	Virginia	Established Virginia Hearing Impairment Identification and Monitoring System
8	Tennessee	Claire's Law, Tennessee Early Intervention System
9	Massachusetts	Advisory Committee
10	New Mexico	Department of Health Newborn Hearing Screening Program

Variations in the Law

- States have taken a variety of approaches to improving rates:
 - Mandate that all hospitals or birthing centers screen infants for hearing loss before they are discharged
 - Mandate that insurance policies cover the cost of the screening
 - Use state dollars to fund screening programs
 - Require that information on hearing screening be available to parents before they leave the hospital
- 14 states allow newborns to be exempt from universal newborn hearing screenings if a parent objects to the testing.
- 36 states as well as Guam, Puerto Rico, and the District of Columbia require hearing screening for newborns.
- 17 states, Guam, Puerto Rico, and the District of Columbia require specified or all health insurers to cover the screening.
- At least 3 states—Massachusetts, Ohio, and West Virginia—have laws that specify who shall pay for the screening if the facility is not reimbursed by a third-party payer and parents are unable to pay.
- A number of states have created task forces or advisory committees on newborn hearing screenings.

Future Directions

- How can states improve rate of follow-up?
 - Incentives (i.e., baby supplies, providing transportation, monetary)
 - Follow-up personalized mailings
 - Increase diversity in hospitals and diagnostic sites to reduce language and cultural barriers
 - Simplify the process of scheduling appointments
 - Repeat screening before the baby is discharged if they failed their initial screening
 - Increase proximity and accessibility to services (i.e., telehealth, home visits)
 - Create specialized task forces or advisory committees on newborn hearing screening that follow-up with families

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