

SENATE BILL REPORT

SB 5950

As Reported By Senate Committee On:
Health & Long-Term Care, March 3, 1999

Title: An act relating to early hearing loss detection, diagnosis, and intervention.

Brief Description: Creating a pilot program to detect early hearing loss.

Sponsors: Senators Fairley, Fraser, Thibaudeau, Kohl-Welles and Prentice.

Brief History:

Committee Activity: Health & Long-Term Care: 3/1/99, 3/3/99 [DPS-WM].

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: That Substitute Senate Bill No. 5950 be substituted therefor, and the substitute bill do pass and be referred to Committee on Ways & Means.

Signed by Senators Thibaudeau, Chair; Wojahn, Vice Chair; Costa, Deccio, Franklin, Johnson and Winsley.

Staff: Christopher Blake (786-7446)

Background: Some studies have reported that 80 percent of a child's ability to acquire speech, language, and other cognitive skills is determined by the age of three. Any degree of hearing loss can impede the development of these skills. It has been suggested that when countermeasures are available to infants under six months of age with a hearing loss, they will encounter fewer developmental delays.

In 1998, the Washington State Legislature requested that the Department of Health propose recommendations for early hearing loss detection, diagnosis, and intervention. A task force was formed and it recommended that all newborns be screened for hearing loss by the age of three months and that appropriate intervention be initiated by six months of age for those diagnosed with hearing loss.

Summary of Substitute Bill: Legislative findings are made. The Department of Health is directed to establish ten early hearing loss detection, diagnosis, and intervention pilot programs around Washington State. The pilot programs must ensure that all newborn infants are screened for hearing loss before hospital discharge or by three months of age, that those infants who fail the screen are diagnosed for hearing loss by six months of age, and that appropriate intervention is provided to those infants diagnosed with hearing loss.

An advisory committee is created to provide guidance and assistance to the program. The advisory committee is to work in conjunction with the department to identify best practice standards for the program, educate the medical community of the value of the program, and create a system of program evaluation.

Health carriers are required to provide early hearing loss detection, diagnosis, and screening services to newborn children.

Reports are to be presented to the Legislature.

Substitute Bill Compared to Original Bill: The emergency clause is removed. Health carriers are to provide early hearing loss detection, diagnosis, and intervention services to newborn children.

Appropriation: \$490,000 is appropriated for the fiscal year ending June 30, 1999. \$260,000 is appropriated for the fiscal year ending June 30, 2000.

Fiscal Note: Not requested.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Testimony For: Early hearing loss detection lessens the impact of hearing impairment to the individual later in life and saves money to school systems. Children with hearing loss who receive intervention services by six months of age are found to have significantly higher developmental levels of cognition, language, and understanding than those diagnosed after six months. Less than one half of hearing impaired children in Washington receive hearing loss intervention services.

Testimony Against: None.

Testified: Senator Fairley, prime sponsor (pro); Representative Conway (pro); Dr. Suzanne Quigley, Listen for Life, Virginia Mason Medical Center (pro); Susan Engman, parent (pro); Dr. Susan Norton, Children's Hospital and Medical Center (pro); Dr. Barry Lawson, Pacific Neonatal Associates (pro); Julia Peterson, Children's Hospital and Regional Medical Center (pro); Lona Jennings, Ben Gilbert, Self-Help for Hard of Hearing (pro); Dr. Maxine Hayes, Department of Health (informational).