

Stricken language would be deleted from and underlined language would be added to law as it existed prior to the 82nd General Assembly.

State of Arkansas As Engrossed: S3/19/99 S4/1/99
82nd General Assembly A Bill Act 1559 of 1999
Regular Session, 1999 SENATE BILL 819
By: Senator Bradford

For An Act To Be Entitled
"AN ACT TO ESTABLISH THE UNIVERSAL NEWBORN/INFANT
HEARING SCREENING, TRACKING, AND INTERVENTION PROGRAM
AND ADVISORY BOARD; TO ENSURE EARLY DETECTION OF
HEARING LOSS FOR ALL NEWBORN/INFANT CHILDREN IN
ARKANSAS; AND FOR OTHER PURPOSES."

Subtitle
"AN ACT TO ESTABLISH THE UNIVERSAL
NEWBORN HEARING SCREENING, TRACKING, AND
INTERVENTION PROGRAM AND ADVISORY BOARD."

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

SECTION 1. The purpose of this act is:

(1) To provide early detection of hearing loss by physiological measurement in newborn children at the birthing facility or as soon after birth as possible, to enable these children and their families and care-givers to obtain needed multi-disciplinary evaluation, treatment, and intervention services at the earliest opportunity; and to prevent or mitigate the developmental delays and academic failures associated with late identification of hearing loss; and

(2) To provide the state with the information necessary to effectively plan, establish, and evaluate a comprehensive system of appropriate services for newborns and infants who have a hearing loss or are deaf.

SECTION 2. As used in this act:

(1) "Birth admission" means the time after birth that the newborn remains in the hospital nursery prior to discharge;

(2) "Birthing hospital" means any hospital located within the state of Arkansas that delivers newborns;

(3) "Board" means the Universal Newborn Hearing Screening, Tracking, and Intervention Advisory Board;

(4) "Department" means the Department of Health;

(5) "Director" means the Director of the Department of Health;

(6) "Follow-up care" and "Follow-up screening" means the follow-up services provided by a licensed audiologist to diagnose a hearing loss;

(7) "Hearing loss" means an impairment that is a dysfunction of the auditory system of any type or degree sufficient to interfere with acquisition and development of speech and language skills;

(8) "Hearing screening" means a bilateral physiological measurement of hearing on a newborn or infant;

(9) "Infants" means a child thirty (30) days to twelve (12) months;

(10) "Intervention" means amplification by a licensed audiologist as required and early intervention services described in Part H of the Individuals with Disabilities Education Act as in effect January 1, 1999;

(11) "Newborn" means a child up to twenty-nine (29) days old;

(12) "Parent" means a natural parent, stepparent, adoptive parent, legal guardian, or other legal custodian of a child;

(13) "Program" means the Universal Newborn Infant Hearing Screening, Tracking, and Intervention Program; and

(14) "Provider" means an audiologist licensed by the State of Arkansas who administers initial newborn/infant hearing screenings upon referral from a hospital or physician or follow-up screenings outside of the hospital setting.

SECTION 3. (a) There is created the Universal Newborn Hearing Screening, Tracking, and Intervention Advisory Board;

(b) The board shall be composed of seven (7) members, appointed by the Governor, with recommendation from the Arkansas Speech-Language-Hearing Association from the following professions or groups:

(1) One (1) audiologist;

(2) One (1) audiologist from the Department of Health;

(3) One (1) audiologist from Arkansas Children's Hospital;

(4) One (1) speech-language pathologist;

(5) One (1) pediatrician/neonatologist or ENT physician;

(6) One (1) adult who is deaf or hard of hearing to represent consumer organizations for deaf and hard of hearing persons; and

(7) One (1) consumer of services who is a parent of a child or children with hearing loss;

(c)(1) Members shall be appointed for three-year staggered terms, to be assigned by lot.

(2)(A) The terms of four (4) of the original members shall expire on January 14, 2001.

(B) The terms of three (3) of the original members shall expire on January 14, 2002.

(3) The terms shall commence on January 15 of each year.

(d) The board shall annually select by majority vote one (1) of its members to serve as a chairperson and one (1) to serve as vice chairperson.

(e) The Governor may remove any member of the examining body for misconduct, incompetency, or neglect of duty, or for any malfeasance in office.

(f) The board shall act by majority vote, and as required by this state's Administrative Procedure Act.

(g) The board shall have the authority to recommend rules and regulations to implement this act; the department shall promulgate these rules and regulations by July 1, 2000.

(h)(1) The board shall hold its first meeting within thirty (30) days of the effective date of this act at a place designated by the department.

(2) Subsequent meetings will be held quarterly, at the call of the chairperson or as often as necessary to make recommendations to the department so that the rules and regulations implementing this act can be promulgated by July 1, 2000.

(3) The board shall complete an annual report for the Joint Interim Committee of Public Health, Labor and Welfare which provides information such as, but not limited to, the number of hospitals in compliance with the act, the number of hearing impaired infants identified and the availability of follow-up services.

(i) The department shall provide administrative support services required by the board.

(j) Members of the board shall not be entitled to compensation for their services but may receive expense reimbursement and a stipend in accordance with Arkansas Code 25-16-902.

SECTION 4. (a) After the effective date of this act and promulgation of rules and regulations, every birthing

hospital in this state with more than fifty (50) births per year shall provide or arrange for a bilateral physiological hearing screening on each birth admission. Medicaid shall reimburse the birthing hospital for the physiological screening the reimbursement equal to that amount paid outpatient providers for the same service in addition to the current rate of per diem paid to the hospital.

(b) Any birthing hospital, provider or physician administering initial hearing screenings to newborns and infants shall forward test results on a screening report to the department by the fifteenth (15th) day of the month following the month in which the test was conducted.

(c) Any birthing hospital, provider or physician screening newborns and infants shall provide information on locations at which medical and audiological follow-up care and follow-up screening can be obtained by the parents or guardians of the newborn and infant.

(d) All providers or physicians completing follow-up screening or follow-up care for hearing impairment shall forward test results on a screening report to the department by the fifteenth (15th) day of the month following the month in which the test was conducted.

SECTION 5. No test is be performed if the parent of a newborn/infant dissents on the ground that the test conflicts with personal religious belief or practice.

SECTION 6. All provisions of this act of a general and permanent nature are amendatory to the Arkansas Code of 1987 Annotated and the Arkansas Code Revision Commission shall incorporate the same in the Code.

SECTION 7. If any provision of this act or the application thereof to any person or circumstance is held invalid, such invalidity shall not affect other provisions or applications of the act which can be given effect without the invalid provision or application, and to this end the provisions of this act are declared to be severable.

SECTION 8. All laws and parts of laws in conflict with this act are hereby repealed.

/s/ Bradford

APPROVED: 4/15/1999