

SENATE BILL NO. 2257

Introduced by

Senator Krebsbach

Representative Svedjan

1 A BILL for an Act to provide for infant hearing detection and intervention.

2 **BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:**

3 **SECTION 1. Definitions.** As used in this Act, unless the context otherwise requires:

- 4 1. "Audiologist" means an individual who may practice audiology in compliance with
5 chapter 43-37.
- 6 2. "Department" means the department of human services.
- 7 3. "Hearing screening test" means an electrophysiologic measure such as auditory
8 brain stem responses, otoacoustic emissions, or another appropriate screening
9 test approved by the department.
- 10 4. "Hospital" means a facility licensed in this state which provides obstetrical services.
- 11 5. "Infant" means a child from birth to one year of age.
- 12 6. "Medical service provider" means any licensed health care professional or any
13 individual conducting the infant hearing screening.
- 14 7. "Parent" means a biological parent, an adoptive parent, a guardian, or a custodian
15 of an infant.
- 16 8. "Performance data set" means the number of infants born in the hospital, the
17 number of infants screened in the hospital, the number of infants not screened, the
18 number of infants referred for additional screening after hospital discharge, the
19 number of infants that follow up with referral for additional screening and
20 assessment, and the number of infants identified with a hearing loss.

21 **SECTION 2. Infant hearing detection and intervention - Oversight responsibility.**

- 22 1. The department shall oversee an infant hearing detection and intervention program
23 and short-term followup services for infants with a known or suspected hearing
24 loss. As part of the program, the department shall:

- 1 a. Designate a standard protocol for infant hearing detection and intervention.
- 2 b. Designate a required performance data set.
- 3 c. Designate a data tracking system capable of electronic interface to screening
- 4 technologies to be used to submit tracking data to the department.
- 5 d. Provide information on hearing screening services and diagnostic referral
- 6 centers to families of an infant who has been referred for additional screening.
- 7 e. Coordinate with hospitals, the infant's primary care physician, and diagnostic
- 8 referral centers in regard to compiling the infant's hearing screening and
- 9 diagnostic data.
- 10 2. A hospital shall conduct an infant hearing detection and intervention program that
- 11 must:
- 12 a. In advance of any hearing screening testing, provide to the infant's parents
- 13 information concerning the nature of the hearing screening procedure,
- 14 applicable costs of the hearing screening procedure, potential risk and effects
- 15 of hearing loss, and benefits of early hearing detection and intervention.
- 16 b. Comply and be consistent with informed consent obtained from the parents.
- 17 c. Provide a hearing screening test for identification of hearing loss for every
- 18 infant born in a hospital, regardless of whether the infant has known risk
- 19 factors suggesting hearing loss. The testing requirements of this section do
- 20 not apply if the parents of an infant object to the testing on the grounds that
- 21 testing for a hearing loss conflicts with the parent's religious, philosophical, or
- 22 moral beliefs.
- 23 d. Follow state-established protocol for infant hearing detection and intervention.
- 24 e. Provide appropriate training and monitoring of the performance of individuals
- 25 responsible for performing hearing screening tests under this Act.
- 26 Appropriate training must include training in:
- 27 (1) The performance of hearing screening tests;
- 28 (2) The risks of the hearing screening tests, including psychological stress
- 29 for the parents;
- 30 (3) Infection control practices; and
- 31 (4) The general care and handling of infants in hospital settings.

- 1 f. Perform hearing screening testing before an infant is discharged from a
2 hospital. If an infant is expected to remain in the hospital for a prolonged
3 period, testing must be performed when the infant is medically stable and
4 preferably before the date on which that infant would attain three months of
5 age.
- 6 g. Submit performance data set to the department using the designated tracking
7 system.
- 8 h. Inform the infant's parents and the infant's primary care physician of the
9 results of the hearing screening test performed under this Act or inform the
10 infant's parents and the infant's primary care physician that the infant was not
11 successfully tested under this Act. Whenever possible, parental notification
12 under this subdivision must occur before discharge of the infant. However, if
13 this notification is not possible, notification must occur no later than ten days
14 following the date of the hearing screening of the infant. Notification under
15 this subdivision must include information regarding appropriate followup for a
16 hearing screening test referral or a missed hearing screening and must
17 include referral information for an additional screening opportunity or
18 diagnostic testing or both. Physician notification under this subdivision must
19 occur no later than ten days following the date of the hearing screening. The
20 hospital shall ensure that the physician or other individual attending the infant
21 is made aware of the community resources available for confirmatory testing
22 and of the process of referral to early intervention services.
- 23 i. Collect performance data specified by the department using the designated
24 tracking system to ensure that each infant hearing detection and intervention
25 program is in compliance with this Act, including the number of infants born,
26 the proportion of all infants screened, the referral rate, and the followup rate.

27 **SECTION 3. Reporting requirement.** The medical service provider who conducts
28 followup screening of an infant shall report the results to the department. The audiologist who
29 diagnoses a hearing loss in an infant shall report the case to the department.

30 **SECTION 4. Confidentiality.** The department and any person to which information is
31 submitted in accordance with this Act shall keep the information confidential and may not

1 publicly disclose the information. The department may request information from and provide
2 information to hospitals, an infant's primary care physician, and diagnostic referral centers in
3 order to compile screening data and provider information to families regarding available hearing
4 services. Except as specifically consented to in writing by a parent of an infant tested under
5 this Act, the department may not publish or disclose individually identifiable information
6 received under this Act.

7 **SECTION 5. Liability.** A hospital or other medical service provider is not criminally or
8 civilly liable for any acts taken in conformity with this Act, including furnishing information
9 required to be furnished under this Act. This Act does not supersede the clinical judgment of
10 the medical service provider.