

PART I ADMINISTRATION OF THE GOVERNMENT
TITLE XVI PUBLIC HEALTH
CHAPTER 111 PUBLIC HEALTH

Section 67F. For the purposes of this section, the words "newborn infant" shall mean an infant under three months of age, and the words "hearing screening test" shall mean a test to detect hearing thresholds of 30 decibels or greater in either ear in the speech frequency range.

A hearing screening test shall be performed on all newborn infants in the commonwealth in the birthing hospital or birthing center, or in the hospital from which the newborn infant is discharged to home. Such test shall be performed before the newborn infant is discharged from the birthing center or hospital to the care of the parent or guardian, or as the department may by regulation provide; provided, however, that such test shall not be performed if the parents or guardian of the newborn infant object to the test based upon the sincerely held religious beliefs of the parent or guardian. The hospital or birthing center shall inform a parent or guardian of the newborn infant and the newborn infant's primary care provider of such infant's failure to pass the test, or if such infant was not successfully tested. Such notification shall occur prior to discharge whenever possible, and in any case no later than ten days following discharge. The hospital or birthing center so informing the parent and provider shall provide information regarding appropriate follow-up for a screening failure or a missed screening.

The cost of providing the newborn hearing screening test shall be a covered benefit reimbursable by all health insurers, except for supplemental policies which only provide coverage for specific diseases, hospital indemnity, Medicare supplement, or other supplemental policies. In the absence of a third party payer, the charges for the newborn hearing screening test shall be paid by the commonwealth.

A newborn infant whose hearing screening test result indicates the need for diagnostic audiological examination shall be offered such examination at a center approved by the department. Such centers shall maintain suitable audiological support, medical and education referral practices in order to receive such approval. If no third party payer is liable for such cost, the commonwealth shall make reimbursement for the cost of such follow-up diagnostic examinations.

There is hereby established an advisory committee for a statewide newborn hearing screening program consisting of the following members to be appointed by the commissioner: a representative of the health insurance industry; a pediatrician or family practitioner; an

otolaryngologist; a neonatologist; a nurse representing newborn nurseries; two audiologists; a teacher of the deaf and hard of hearing; a representative of the commonwealth's early intervention program; a representative of the department; two parents of children who are deaf or hard of hearing; and one deaf and one hard of hearing adult to be designated by the Massachusetts commission for the deaf and hard of hearing. The advisory committee shall advise the department regarding proposed regulations and the validity and cost of screening procedures, and shall recommend standards for appropriate screening methodology based on updated technological developments, methods of recording results and follow-up from the screening program, and methods to facilitate interaction of professions and agencies which participate in follow-up. Members of the advisory committee shall serve without compensation. The advisory committee shall be provided support services by the department.

The advisory committee shall elect a chairman from among its members.

Each hospital and birthing center which provides newborn infant care shall submit to the department for its approval a protocol for newborn hearing screening, including training and supervision of personnel by a licensed audiologist, test protocol, follow-up procedures, quality assurance and program statistics, at the onset of the program, following one full year of operation, prior to any significant changes in protocol, and at intervals specified by the department.

Notwithstanding the requirements of this section for the provision of newborn hearing screening tests, if a birthing center does not have the equipment or ability to conduct such a test, the newborn infant shall be referred to a hospital or birthing center approved by the department for such test in accordance with the provisions of this section.

The department shall promulgate regulations to implement the newborn hearing screening program.

Section 67G. Every person in control of a child who has reached age four shall cause such child to be given a complete pure tone test using conventional audiometric tests at such public schools and by such pediatric audiologists or school testers as are approved and designated by the commissioner. The costs for such examinations shall be borne by the commonwealth. In the event such a child fails such pure tone tests, the tester or pediatric audiologist shall advise the parent or legal guardian to consult the otologist of his choice who is in private practice. If upon examination such otologist recommends further tests, the diagnostic services of the approved hospital centers referred to in section sixty-seven F shall be made available to such children at a cost to be borne by the commonwealth.

Section 67H. The literature required by section sixty-seven F shall describe the following high risk conditions: (1) Before birth (a) Family history of deafness as indicated by one or more deaf or hard of hearing children in family; (b) Maternal thyroid abnormality; (c) Maternal German measles in the first three months of pregnancy; (d) Maternal influenza or chicken pox in first three months of pregnancy, and (2) Newborn difficulty (a) Mycin drugs administered to infant; (b) Multiple abnormalities of infant, from whatever cause.