

PUBLIC HEALTH

(410 ILCS 213/) Early Hearing Detection and Intervention Act.

(410 ILCS 213/1)

Sec. 1. Short title. This Act may be cited as the Early Hearing Detection and Intervention Act.

(Source: P.A. 99-834, eff. 8-19-16.)

(410 ILCS 213/2)

Sec. 2. Definitions. As used in this Act:

"Department" means the Department of Public Health.

"Medical care facility" means a hospital, birthing center, and any other licensed facility that provides obstetrical and newborn nursery services.

(Source: P.A. 99-834, eff. 8-19-16.)

(410 ILCS 213/5)

Sec. 5. Mandatory hearing screening.

(a) Each medical care facility shall conduct bilateral hearing screening of each newborn infant prior to discharge unless medically contraindicated or the infant is transferred to another hospital before the hearing screening can be completed. If the infant is transferred to another hospital prior to completion of the hearing screening, the hospital to which the infant is transferred shall complete the hearing screening prior to discharge. All medical care facilities shall make provisions for an outpatient screening for infants born outside a medical care facility.

(b) The facility performing the hearing screening shall report the results of the hearing screening to the Department within 7 days of screening.

If there is no hearing screening result or an infant does not pass the hearing screening in both ears at the same time, the medical care facility shall refer the infant's parents or guardians to a health care practitioner for follow-up, and document and report the referral, including the name of the health care practitioner, to the Department in a format determined by the Department.

For infants born outside a medical care facility, the newborn's primary care provider shall refer the patient to a medical care facility for the hearing screening to be done in compliance with this Section within 30 days after birth, unless a different time period is medically indicated.

(c) Follow-up to hearing screening includes:

(1) for newborns, infants, and children with confirmed hearing loss, making the audiological, medical, language and communication, aural habilitation, parent-to-parent support, and

intervention referrals and documenting the referrals and outcomes to the Department or in the State's designated data system; and

(2) for newborns, infants, and children with a confirmed hearing loss, audiologists, early intervention programs and providers, parent-to-parent support programs, the Department of Human Services, and the University of Illinois at Chicago Division of Specialized Care for Children reporting screening, diagnosis, amplification, and intervention outcomes to the Department.

(Source: P.A. 99-834, eff. 8-19-16.)

(410 ILCS 213/10)

Sec. 10. Reports to Department of Public Health. Physicians, advanced practice registered nurses, physician assistants, otolaryngologists, audiologists, ancillary health care providers, early intervention programs and providers, parent-to-parent support programs, the Department of Human Services, and the University of Illinois at Chicago Division of Specialized Care for Children shall report all hearing testing, medical treatment, and intervention outcomes related to newborn hearing screening or newly identified hearing loss for children birth through 6 years of age to the Department. Reporting shall be done within 7 days after the date of service or after an inquiry from the Department. Reports shall be in a format determined by the Department.

(Source: P.A. 99-834, eff. 8-19-16; 100-513, eff. 1-1-18.)

(410 ILCS 213/15)

Sec. 15. Department of Public Health to maintain registry of cases. The Illinois Department of Public Health shall maintain a registry documenting screening, diagnosis, and intervention of cases of positive hearing screening results, including information needed for the purpose of follow-up services.

(Source: P.A. 99-834, eff. 8-19-16.)

(410 ILCS 213/20)

Sec. 20. (Repealed).

(Source: P.A. 91-67, eff. 7-9-99. Repealed by P.A. 99-834, eff. 8-19-16.)

(410 ILCS 213/23)

Sec. 23. Information sharing.

(a) For the purposes of documentation and coordination of medical care or intervention services, the Department may share newborn hearing screening information with medical care facilities, health

care providers, early intervention programs and providers, local health departments, the Department of Human Services, and the University of Illinois at Chicago Division of Specialized Care for Children.

(b) For the purposes of documentation and coordination of medical care or intervention services, medical care facilities, health care providers, early intervention programs and providers, local health departments, the Department of Human Services, and the University of Illinois at Chicago Division of Specialized Care for Children shall submit information or reports about newborn, infant, and child hearing screening and diagnostic testing, follow-up services, intervention, and parent support services to the Department. Documentation is only required to be provided for those services provided. Reporting shall be done within 7 days of the date of service or an inquiry from the Department. Reports shall be in a format determined by the Department. Reports by medical care facilities shall be in accordance with only subsections (a) and (b) of Section 5.

(c) Except in cases of willful or wanton misconduct, no health care provider, hospital, or medical facility acting in compliance with this Section shall be civilly or criminally liable for any act performed in compliance with this Section, including furnishing information required according to this Section.

(Source: P.A. 99-834, eff. 8-19-16.)

(410 ILCS 213/25)

Sec. 25. Objections to test. The provisions of this Act shall not apply when the parent or guardian of the newborn infant objects to hearing screening on the grounds that the screening conflicts with his or her religious beliefs and practices. A written statement of the objection shall be presented to the physician or other person whose duty it is to administer and report the screening under the provisions of this Act.

(Source: P.A. 91-67, eff. 7-9-99.)

(410 ILCS 213/30)

Sec. 30. Rules. The Department shall adopt rules necessary to implement this Act.

(Source: P.A. 99-834, eff. 8-19-16.)

(410 ILCS 213/99)

Sec. 99. Effective date. This Act takes effect upon becoming law.

(Source: P.A. 91-67, eff. 7-9-99.)