

Title 44 - Health

CHAPTER 37

Care of the Newly Born

SECTION 44-37-40. Universal Newborn Hearing Screening and Intervention Act.

(A) This section may be cited as the "Universal Newborn Hearing Screening and Intervention Act".

(B) For purposes of this section:

(1) "Advisory council" means the Newborn Hearing Screening and Intervention Advisory Council.

(2) "Audiologist" means an individual licensed to practice audiology by the South Carolina Board of Examiners in Speech-Language Pathology and Audiology.

(3) "Audiologic evaluation" means an evaluation consisting of procedures to assess the status of the auditory system; to establish the site of an auditory disorder; the type and degree of hearing loss, and the potential effects of hearing loss on communication; and to identify appropriate treatment and referral options. Referral options for evaluation should include linkage to state Part C "Individuals with Disabilities Education Act" coordinating agencies or other appropriate agencies, medical evaluation, hearing aid/sensory aid assessment, audiologic rehabilitation treatment, national and local consumer, self-help, parent and education organizations, and other family centered services.

(4) "Auditory habilitation" means intervention which includes the use of procedures, techniques, and technologies to facilitate the receptive and expressive communication abilities of a child with hearing loss.

(5) "Birth admission" means the time after birth that the newborn remains in the hospital nursery before discharge.

(6) "Commissioner" means the Commissioner of the South Carolina Department of Health and Environmental Control.

(7) "Department" means the South Carolina Department of Health and Environmental Control.

(8) "Early intervention" means providing appropriate services for a child with hearing loss and ensuring that the family of the child is provided comprehensive, consumer-oriented information about the full range of family support, training, information services, and communication options and is given the opportunity to consider the full range of educational and program placements and options for this child.

(9) "Hearing loss" for newborns and neonates means failure to pass the brainstem auditory evoked response performed at the audiologic evaluation. Current hearing screening technology detects levels of hearing loss as low as 35 decibels.

(10) "Hearing screening" means newborn and infant hearing screening consisting of objective physiologic procedures to detect possible hearing loss and to identify newborns and infants who, after rescreening, require further audiologic and medical evaluations.

(11) "Infant" means a child twenty-nine days to twenty-four months old.

(12) "Medical intervention" means the process by which a physician provides medical diagnosis and direction for medical or surgical treatment options for hearing loss or related medical disorders associated with hearing loss.

(13) "Newborn" means a child up to twenty-eight days old.

(14) "Normal hearing" for newborns and infants is 0-15 decibels hearing level. Any hearing level greater than 15 decibels can adversely affect speech and language development. The greater the hearing level the greater the adverse impact on speech and language development.

(15) "Parent" means a natural parent, step-parent, adoptive parent, legal guardian, or other legal custodian of a child.

(16) Part C of "Individuals with Disabilities Education Act" means the federal "Early Intervention Program for Infants and Toddlers with Disabilities and Developmental Delay Act" which encourages exemplary practices that lead to improved teaching and learning experiences for children with developmental delay, and that can result in more productive independent adult lives, including employment.

(C)(1) Beginning no later than June 30, 2001, newborn hearing screenings must be conducted during birth admission on all newborns born in hospitals in this State using procedures recommended or approved by the department. However, when a newborn is delivered in a hospital with an average of less than one hundred deliveries a year, the screening is not required, but the parents must be given the information required pursuant to subsection (C)(3).

(2) Beginning no later than April 1, 2001, every hospital in this State shall provide educational information for the parents of newborns born in that hospital concerning the hearing screening procedure and the importance of the screening. Education may not be considered a substitute for the hearing screening.

(3) When a newborn is delivered in a hospital where the hearing screening is not required pursuant to subsection (C)(1) or somewhere other than a hospital, the parents must be instructed on the importance of a hearing screening and of having the screening performed within one month of the child's birth

date. Parents also must be given information to assist them in having the screening performed. The department shall determine the appropriate screening venue for newborns not receiving a hospital-conducted screening.

(D)(1) Newborns referred as a result of the screening process shall receive an audiologic evaluation by an audiologist and a medical evaluation by a physician or otolaryngologist, or both, as indicated.

(2) Newborns and infants referred as a result of the evaluation process shall receive medical intervention, audiologic habilitation, early intervention services, and augmentative hearing devices.

(3)(a) The department, upon consultation with the South Carolina Health Alliance, shall establish newborn hearing screening reporting procedures which must be followed by hospitals, audiologists, and early interventionists.

(b) The department also shall establish procedures to monitor and measure the effectiveness of newborn and infant hearing screening and intervention and shall report annually to the General Assembly and to participating hospitals.

(c) Subject to available appropriations, the department shall make reports required pursuant to this subsection available throughout the State, specifically to physicians whose practice includes the practice of obstetrics, neonatology, or the care of newborns and infants, to consumer groups, managed care organizations, other third party payers, and the media.

(E) The department shall establish the Newborn Hearing Screening and Intervention Advisory Council, consisting of representatives of agencies, professional disciplines, hospitals, and consumers to advise the department on matters related to the implementation of this section and duties of the department under this section.

(F) The department may promulgate regulations to the extent necessary to implement the provisions of this section.

(G) The department and the Department of Health and Human Services shall establish procedures for providing reimbursement for expenses incurred by entities providing newborn hearing screenings under this section.

(H) Responsibilities of the department under this section including, but not limited to, reimbursements authorized pursuant to subsection (G) must be funded from proceeds received by the State in the settlement agreement and related documents, between the State and leading United States tobacco manufacturers dated November 23, 1998.

HISTORY: 2000 Act No. 387, Part II, Section 48A.