



The Commonwealth of Massachusetts  
Executive Office of Health and Human Services  
Department of Public Health  
250 Washington Street, Boston, MA 02108-4619

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**Massachusetts Department of Public Health (DPH)  
Universal Newborn Hearing Screening Program  
Advisory Committee Meeting, 250 Washington Street, Boston, MA  
Public Health Council Room, 2<sup>nd</sup> floor  
Meeting Date: Monday, September 12, 2016**

**Quorum was reached for this meeting – 9/12/2016**

Appointed members present: Michelle Eisan-Smith, Jennifer Fleming, Darla Gundler, Marly Kenna, Christine Majeskey, Kathy Manfield, Jane Stewart, Sarah Stone and Peg Toro

Appointed members not present: Barb Herrmann, Aimee Knorr, Gale Ann Merle

UNHS Staff in attendance: Janet Farrell, Martha Morris and Amarilys Triana Walsh

Others in attendance: Jennifer Bentley, Melissa Dowler, Andrew Granese, Cathy Guiliani, Sarah Honigfeld, Lauren McGrath, Marilyn Neault, Mark Parker, Jayme Rivas Robertson and Kathy Vesey

**Materials distributed:**

1. Agenda
2. Chapter 243 of the Acts of 1998
3. Massachusetts DPH Audiological Assessment/Diagnostic Center Guidelines
4. Infants who may be deaf or hard of hearing, Special considerations for otolaryngology (published by CDC)
5. Hearing Loss in Infants and Young Children: Considerations for Pediatric Primary Care Providers (published by CDC)

**Welcome and Introductions:** Janet Farrell, Program Director, Universal Newborn Hearing Screening Program welcomed the group and introductions were made. Janet discussed the Open Meeting Law and the requirements of having a quorum in the room. The Commissioner appointed the members in accordance with the newborn hearing screening statute in the categories described in the law (see below). A larger group attends these meetings and we encouraged that to continue. The MA Open Meeting Law promotes open participation. If a vote comes to the floor, only the appointed members can vote. Several handouts were distributed.

**Advisory Committee Members:** Members serve without compensation and with the organizational support of the Department of Public Health. The members of the Advisory Committee who serve as the deaf and hard of hearing adults are designated by the Massachusetts Commission for the Deaf and Hard of Hearing. At the next meeting, a chair will have to be elected by the group. Barbara Herrmann has been serving as the Chair. The recent reappointment of the Advisory Committee makes it necessary to appoint or reappoint a Chair. Barbara could not attend this meeting.

- Health insurance industry (vacant)
- Pediatrician or family practice
- Otolaryngologist
- Neonatologist
- Nurse representing newborn nurseries (vacant)
- Two audiologists
- Teacher of the deaf
- Early Intervention
- Department of Public Health
- Two parents whose children are deaf or hard of hearing
- One deaf and one hard of hearing adult

**Responsibilities of the Advisory Committee:** Janet described the responsibilities of the Advisory Committee

- Advisory Committee shall elect a chairman among its members
- Advise the Department regarding proposed regulations and guidelines
- Validity and cost of screening technology
- Standards for appropriate screening methodology based on updated technological development
- Methods of recording results and follow-up for the screening program
- Methods to facilitate interaction of professions and agencies which participate in follow-up

**Statute:** Janet also presented the responsibilities in Chapter 243 of the Acts of 1998, An Act Providing for Hearing Screening of Newborns.

- Universal hearing screening of all infants in birthing hospitals or birth centers prior to discharge
- Sincerely held religious belief – opt out
- Facilities responsible for notification of physician of hearing screening results (prior to discharge or no later than ten days)
- Notification to parents, including follow-up testing (did not pass or missed hearing screen and prior to discharge or no later than ten days)
- Cost of screening shall be a covered benefit

- In the absence of a third party, newborn hearing screening test shall be paid by the Commonwealth
- Approval of audiological diagnostic centers across the state
- Payer of last resort for diagnostic audiological testing
- Promulgate regulations to implement newborn hearing screening
- Hearing screening protocols submitted to the Department of Public Health, including training and supervision of personnel by a licensed audiologist (at intervals established by the Department-currently every five years)

**Current Maternal and Child Health Bureau Funding Opportunity:** Janet Farrell described briefly the priorities of the new Health Resources Services Administration (HRSA), Maternal and Child Health Bureau (MCHB) grant opportunity. Janet has been writing this grant since the year 2000 and MA has received funding for the past sixteen years. The grant has mainly focused on timely screening, diagnosis, and intervention, our 1, 3, 6 goals and the most recent funding cycle focused on Quality Improvement (QI). This funding is focused on optimizing language, literacy and social and emotional development. This will be accomplished through building a comprehensive EHDI System of Care, increasing health care professionals' engagement with EHDI, and improving family engagement, partnership, and leadership.

Our program will be expected to develop learning communities and foster increased communication with EI. There are a number of metrics that will be measured, including the number aware of JCIH 1-3-6, number of deaf and hard of hearing children with a care coordinator, and number of health professionals with partnerships with the state EHDI. QI will continue to be embedded in the model. Developing systems to measure numbers of deaf and hard of hearing children with shared plans of care (shared across providers) will also be a key component. We will be calling on our stakeholders to participate in grant activities.

Requirements include that a significant portion of the funding will be contracted out to a parent run organization that serves families who are deaf and hard of hearing. We are excited about developing strategies that can be used to enhance family support, but this removes a significant portion of our core funding for the program.

**Universal Newborn Hearing Screening Program, 2014 Data:** Martha Savaria Morris, Ph.D., Epidemiologist, Universal Newborn Hearing Screening Program presented the 2014 UNHSP calendar year data that was submitted to CDC. MA continues to submit comprehensive data in all categories to CDC. Highlights include: 99.5% screen rate (close to 100% for hospital births), consistent 1.8% did not pass/refer rate, 4.6% lost to follow-up rate, and a new milestone of enrollment in EI at 84.2%. Closing comments included: 1) Rate of decline in births is slowing, 2) MA versus the nation compares favorably in data in all categories, 3) Missed screens at birth hospitals at an all-time low, 4) Homebirths/transfers comprise most unscreened, 5) the not diagnosed category is inching back down, 6) Tier 1 and 2 Risk Factors Predict CHL, but not SNHL, and 7) 2014, was first year >80% of infants diagnosed with hearing loss were enrolled in EI (since 2007, timely EI has only increased from 40% to 60% and laterality and degree affect EI enrollment).

### **Department of Public Health Approved Audiological Diagnostic Center Revised**

**Guidelines:** Sarah Stone, Communications Coordinator, Universal Newborn Hearing Screening Program presented on this topic and a copy of the guidelines and state statute were provided for the discussion. The DPH Approved Audiological Diagnostic Center Guidelines are in the process of being updated. They have been reviewed by the audiology centers and Sarah provided comments that were discussed with the audiologists. Advisory Committee members were asked to review the document, provide comment and it is expected that there will only be minor changes and they will be finalized at the next Advisory Committee meeting.

### **Other Updates**

- **EI Snapshot Project:** Massachusetts will be participating with several other states in the EI Snapshot project. EI Snapshot is working towards understanding how EHDI and EI work for families in the state. There are several activities: family surveys, EI provider surveys, and audiologist surveys. There are also key informant interviews with states and providers. If you receive an e-mail requesting that you fill out the survey, please participate.