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An Act To Implement the Recommendations of the Working Group To Study the Effectiveness and Timeliness of Early Identification and Intervention for Children with Hearing Loss in Maine

Be it enacted by the People of the State of Maine as follows:

Sec. 1. 22 MRSA §8822, sub-§4-A is enacted to read:

4-A. Follow-up appointment with an audiologist. Upon the approval of a parent of a newborn who is screened and receives a screening result of "refer," the birthing hospital or birthing center in which the child was born shall schedule the newborn for a follow-up appointment with an audiologist. That follow-up appointment must be scheduled prior to discharge and the hospital or center shall notify the newborn's primary care provider in writing prior to discharge.

Sec. 2. Report on barriers to access to audiologists. The Newborn Hearing Program, established in the Maine Revised Statutes, Title 22, chapter 1686 shall report to the joint standing committee of the Legislature having jurisdiction over health and human services matters on the results of its study of barriers to access to audiologists for the continued evaluation of hearing loss in newborns.

SUMMARY

This bill implements the unanimous recommendations of the Working Group To Study the Effectiveness and Timeliness of Early Identification and Intervention for Children with Hearing Loss in Maine.

The bill requires a birthing hospital or birthing center, upon the approval of a parent of a newborn whose hearing is screened and receives a result of "refer," to schedule the newborn for a follow-up appointment with an audiologist. That appointment must be scheduled prior to discharge, and the birthing hospital or center shall notify the newborn's primary care provider in writing of such a referral prior to discharge.

The bill also requires the Newborn Hearing Program within the Department of Health and Human Services to report to the joint standing committee of the Legislature having jurisdiction over health and human services matters on the results of its study of barriers to access to audiologists for the continued evaluation of hearing loss in newborns.