Support Passage of S. 2424 and H.R. 1344

Original House Sponsors - Rep. Brett Guthrie (R-KY) and Rep. Lois Capps (D-CA)
Passed in the House - September 8, 2015
Original Senate Sponsors: Senator Rob Portman (R-OH) and Senator Kirsten Gillibrand (D-NY)
Introduced and Referred to Senate HELP Committee – December 18, 2015

BILL SUMMARY
• S. 2424 and H.R. 1344 amends the Public Health Service Act to reauthorize research and public health activities related to early detection, diagnosis, and treatment of hearing loss in newborns, infants, and young children.\(^1\) ACI Alliance strongly supports new provisions in the legislation that would ensure parents of children with hearing loss are presented with the full range of treatment options and that the reauthorization is extended to young children, in addition to newborns and infants. Activities authorized under the bill are conducted by HRSA, CDC, and NIH.

BACKGROUND
• Two to three out of every 1,000 children in the United States are born deaf or hard-of-hearing and more lose their hearing later in childhood, according to the National Institute of Health.

• Certain genetic disorders, environmental causes, complications after birth, and certain infections can cause hearing loss in infants and children.

• Early Hearing Detection and Intervention (EHDI) refers to the practice of screening every newborn for hearing loss prior to hospital discharge. Infants not passing the screening receive diagnostic evaluation before three months of age and, when necessary, early intervention services by six months of age.

• According to reports, early intervention is particularly critical for speech acquisition in many children with hearing loss. All 50 states and the District of Columbia have EHDI laws or voluntary compliance programs that screen hearing.

• Early detection of hearing loss is just like the early detection of any other disease or illness—it can dramatically change the outcome of one’s prognosis.

• The Congressional Budget Office (CBO) estimates that enacting the EHDI Reauthorization bill would cost $212 million over the 2016 to 2020 period, assuming appropriation of the specified and necessary amounts. Enacting H.R. 1344 would not affect direct spending or revenues; therefore, pay-as-you-go procedures do not apply and it imposes no unfunded mandates.

REQUEST
• SENATORS: Please cosponsor S. 2424 and support its passage through the Senate HELP Committee as soon as possible and onto the Senate floor for passage.
• HOUSE MEMBERS: Please support EHDI Reauthorization being signed by the President this year.

\(^1\) H.R. 1344 reauthorizes the federal authority for hearing tests and intervention programs for newborn babies, which were first authorized through the Newborn Infant Hearing Screening and Intervention Act of 1999.