

Analysis
Oregon Health Authority
Early Hearing Detection Grant

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Request: Approve the submission of a federal grant application to the Centers for Disease Control and Prevention in the amount of up to \$250,000 per year for three years to support the early identification of deaf and hard of hearing infants and ensure that they receive services.

Recommendation: Approve the request.

Analysis: The Oregon Health Authority is requesting approval to apply for the Documentation and Use of Follow-up Diagnostic and Intervention Services Data through the Maintenance and Enhancement of the Early Hearing Detection and Intervention Information System grant from the Centers for Disease Control and Prevention (CDC). The grant is for up to \$250,000 per year for three years, starting July 1, 2017.

Oregon's Early Hearing Detection and Intervention (EHDI) program resides in the Public Health Division, and is responsible for collecting data and tracking: 1) the hearing screening status of all newborns, 2) follow-up diagnostic evaluations when appropriate, 3) eligibility and enrollment in early intervention services for infants with hearing loss, as well as general reporting. This continuing grant is one of two sources of federal funds for this program.

Statute requires that all hospitals that have 200 births or more must provide hearing screening before the infants leave the hospital. Those who screen with suspected hearing loss are referred to an audiologist for an assessment. If appropriate, the infant is then referred to an Early Intervention program, funded through the Oregon Department of Education, with the ultimate goal of reducing any developmental delays related to the hearing loss. EHDI facilitates data sharing at each step, and also supports the process, making sure infants do receive follow-up and early intervention services. EHDI does not, however, provide any of the direct services.

This grant provides funding to improve the capacity of current EHDI information systems to collect complete, accurate data at each step of the process, including expansion of electronic data exchange. It will also provide expanded capacity to participate in a CDC data exchange and improve data quality and reporting.

This competitive grant application is due March 6, 2017. No state matching funds are required, and there is no federal requirement for maintenance of effort. No additional staff are needed, and if necessary, the additional federal funds expenditure limitation will be included as part of the agency's 2017-19 budget recommendation.

The Legislative Fiscal Office recommends approval of the request to apply for a grant from CDC for \$250,000 per year for three years to support the early identification of deaf and hard of hearing infants.