

BILL ANALYSIS

Senate Research Center

H.B. 2255
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Health & Human Services
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Engrossed

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

Being deaf or hard of hearing can affect a child's ability to develop speech, language, and social skills. The earlier a child who is deaf or hard of hearing starts getting services, the more likely the child's speech, language, and social skills will reach their full potential.

The Centers for Disease Control and Prevention indicates that infants who are deaf or hard of hearing should begin to get intervention services as soon as possible, but no later than six months of age. The newborn hearing screening in Texas was established by the passage of H.B. 714 in 1999 and implemented in 2000. Most newborn hearing screenings are administered at the birthing facilities where the infants are born before they leave the hospital.

In 2013, 98.8 percent of infants received a newborn hearing screening in Texas and 5,222 infants did not pass. Simply because an infant does not pass the newborn screening does not mean the infant is deaf or hard of hearing.

The only way to confirm whether an infant is potentially deaf or hard of hearing is with a follow-up screening, but only 1,540 Texas infants received a follow-up to confirm a result of deafness. In other words, 3,682 infants needed a follow-up screening but did not receive one.

Goal 1: To better inform parents of deaf and hard of hearing children about the public resources available to them, and to better equip those parents to prepare their children for kindergarten.

Under current law, birthing facilities operating screening programs must distribute educational materials to parents of newborns and infants found to be deaf or hard of hearing. H.B. 2255 would require birthing facilities to distribute informational materials regarding Early Childhood Intervention (ECI) Services and the Texas School for the Deaf (TSD), as well as the contact information for the Texas Early Hearing Detection and Intervention (TEHDI) simultaneously with the screening results.

Goal 2: To increase the utilization of the ECI Services that are available to deaf and hard of hearing children in Texas and to better identify deaf and hard of hearing children in Texas.

When an infant does not pass a follow-up screening, H.B. 2255 would require whomever administered the follow-up screening to refer the infant to relevant services. H.B. 2255 would also authorize screening results to be shared with the Department of State Health Services/Health and Human Services, and the Educational Resource Center on Deafness (ERCOD)/Texas School for the Deaf if a parent consents in writing.

H.B. 2255 amends current law relating to newborn and infant hearing screening results and the provision of information following a screening.

RULEMAKING AUTHORITY

Rulemaking authority previously granted to the executive commissioner of the Health and Human Services Commission (executive commissioner) is modified in SECTION 3 of this bill.

Rulemaking authority is expressly granted to the executive commissioner in SECTION 4 of this bill.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Section 47.0031(b), Health and Safety Code, as follows:

(b) Requires the program that performed a follow-up screening, if a newborn or an infant does not pass the screening in a follow-up hearing screening, to:

(1) provide the screening results to:

(A) makes nonsubstantive changes; and

(B) with the prior written consent of the newborn's or infant's parents, the primary statewide resource center established under Section 30.051 (Purpose of Texas School For the Deaf), Education Code;

(2) makes no changes to this subdivision; and

(3) refer the newborn or infant to early childhood intervention services and the primary statewide resource center established under Section 30.051, Education Code, rather than refer the newborn or infant to early childhood intervention services.

SECTION 2. Amends Section 47.005, Health and Safety Code by amending Subsections (a) and (b) and adding Subsection (a-1), as follows:

(a) Requires a birthing facility that operates a program to simultaneously distribute, rather than to distribute, to the parents of each newborn or infant who is screened:

(1) the screening results; and

(2) educational and informational materials that are standardized by the Department of State Health Services (DSHS) regarding:

(A) follow-up care, rather than screening results and follow-up care; and

(B) available public resources, including:

(i) early childhood intervention services developed under Chapter 73 (Early Childhood Intervention Services), Human Resources Code;

(ii) the primary statewide resource center established under Section 30.051, Education Code; and

(iii) contact information for Texas Early Hearing Detection and Intervention.

(a-1) Requires DSHS to make available to the public on request the educational and informational materials described by Subsection (a)(2).

(b) Requires a birthing facility that operates a program to report screening results to:

(1) makes no changes to this subdivision;

(2)–(3) makes nonsubstantive changes to these subdivisions; and

(4) the primary statewide resource center established under Section 30.051, Education Code.

SECTION 3. Amends Section 47.008(c), Health and Safety Code as follows:

(c) Requires the executive commissioner of the Health and Human Services Commission (executive commissioner) by rule to develop guidelines to protect the confidentiality of patients in accordance with Chapter 159 (Physician-Patient Communication), Occupations Code, and require the written consent of a parent or guardian of a patient before any individually identifying information is provided to DSHS or the primary statewide resource center established under Section 30.051, Education Code, as set out in this chapter, rather than is provided to DSHS. Makes a conforming change.

SECTION 4. Requires the executive commissioner, as soon as practicable after the effective date of this Act, to adopt rules as necessary to implement the changes in law made by this Act.

SECTION 5. Effective date: September 1, 2019.