UTAH SCHOOLS FOR THE DEAF AND THE BLIND
REFERRAL AMENDMENTS
2017 GENERAL SESSION
STATE OF UTAH
Chief Sponsor: Derrin R. Owens
Senate Sponsor: Howard A. Stephenson
LONG TITLE
General Description:
This bill amends provisions related to educational services for an individual with a
hearing loss.
Highlighted Provisions:
This bill:
requires reporting results of a test for hearing loss to the Utah Schools for the Deaf
and the Blind <b>\$→</b> and an early intervention program ←\$ under certain circumstances;
<ul> <li>requires the Utah Schools for the Deaf and the Blind to provide educational services</li> </ul>
to certain individuals; and
<ul> <li>makes technical and conforming changes.</li> </ul>
Money Appropriated in this Bill:
None
Other Special Clauses:
None
<b>Utah Code Sections Affected:</b>
AMENDS:
26-10-6, as last amended by Laws of Utah 2013, Chapter 132
53A-25b-301, as enacted by Laws of Utah 2009, Chapter 294
ENACTS:



59	reported to:
60	[(a) parents when results of tests for hearing loss under Subsection (1) suggest that
61	additional diagnostic procedures or medical interventions are necessary; and]
62	[(b)] (a) the department[-]; and
63	(b) when results of tests for hearing loss under Subsection (1) suggest that additional
64	diagnostic procedures or medical interventions are necessary:
65	(i) a parent or guardian of the infant; Ŝ→ [and]
65a	(ii) an early intervention program administered by the department in accordance with
65b	Part C of the Individuals with Disabilities Education Act, 20 U.S.C. Sec. 1431 et seq.; and ←Ŝ
66	\$→ [(iii)] (iii) ←\$ the Utah Schools for the Deaf and the Blind, created in Section
66a	<u>53A-25b-103.</u>
67	(5) (a) There is established the Newborn Hearing Screening Committee.
68	(b) The committee shall advise the department on:
69	(i) the validity and cost of newborn infant hearing loss testing procedures; and
70	(ii) rules promulgated by the department to implement this section.
71	(c) The committee shall be composed of at least 11 members appointed by the
72	executive director, including:
73	(i) one representative of the health insurance industry;
74	(ii) one pediatrician;
75	(iii) one family practitioner;
76	(iv) one ear, nose, and throat specialist nominated by the Utah Medical Association;
77	(v) two audiologists nominated by the Utah Speech-Language-Hearing Association;
78	(vi) one representative of hospital neonatal nurseries;
79	(vii) one representative of the Early Intervention Baby Watch Program administered by
80	the department;
81	(viii) one public health nurse;
82	(ix) one consumer; and
83	(x) the executive director or [his] the executive director's designee.
84	(d) Of the initial members of the committee, the executive director shall appoint as
85	nearly as possible half to two-year terms and half to four-year terms. Thereafter, appointments
86	shall be for four-year terms except:
87	(i) for those members who have been appointed to complete an unexpired term; and
88	(ii) as necessary to ensure that as nearly as possible the terms of half the appointments
89	expire every two years.

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90	(e) A majority of the members constitute a quorum, and a vote of the majority of the
91	members present constitutes an action of the committee.
92	(f) The committee shall appoint a chairman from [its] the committee's membership.
93	(g) The committee shall meet at least quarterly.
94	(h) A member may not receive compensation or benefits for the member's service, but
95	may receive per diem and travel expenses in accordance with:
96	(i) Section 63A-3-106;
97	(ii) Section 63A-3-107; and
98	(iii) rules made by the Division of Finance pursuant to Sections 63A-3-106 and
99	63A-3-107.
100	(i) The department shall provide staff for the committee.
101	(6) [Prior to] Before implementing the test required by Subsection (1)(d), the
102	department shall conduct a pilot program for testing newborns for critical congenital heart
103	defects using pulse oximetry. The pilot program shall include the development of:
104	(a) appropriate oxygen saturation levels that would indicate a need for further medical
105	follow-up; and
106	(b) the best methods for implementing the pulse oximetry screening in newborn care
107	units.
108	Section 2. Section <b>26-10-12</b> is enacted to read:
109	26-10-12. Reporting results of a test for hearing loss.
110	(1) As used in this section, "health care provider" means the same as that term is
111	defined in Section 78B-3-403.
112	(2) $\hat{\mathbf{H}} \rightarrow [\underline{\mathbf{A}}]$ Except as provided in Subsection (3), $\mathbf{a} \leftarrow \hat{\mathbf{H}}$ health care provider shall report
112a	results of a test for hearing loss to the Utah
113	Schools for the Deaf and the Blind if:
114	(a) the results suggest that additional diagnostic procedures or medical interventions
115	are necessary; and
116	(b) the individual tested for hearing loss is under the age of 22.
116a	$\hat{H} \rightarrow (3)$ A health care provider may not make the report of an individual's results described
116b	in Subsection (2) if the health care provider receives a request to not make the report from:

- 11 116c
  - (a) the individual, if the individual is not a minor; or
- (b) the individual's parent or guardian, if the individual is a minor.  $\leftarrow \hat{H}$ 116d
- 117 Section 3. Section 53A-25b-301 is amended to read:
- 118 53A-25b-301. Eligibility for services of the Utah Schools for the Deaf and the 119 Blind.
- 120 (1) Except as provided in Subsections (3) [and], (4), and (5), a person is eligible to