

Resolution 4-05

Support for Universal Newborn Hearing Screening in Alaska

Submitted by:

Margaret Lanier Kossler, MPH, CHES

WHEREAS, hearing impairment is the most common disability in newborns, with a higher incidence than cerebral palsy, Down Syndrome, and severe mental retardation (1); and

WHEREAS, approximately 10,000 babies are born each year in Alaska and according to statistics, 30-40 will likely have some type of congenital hearing loss (2); and

WHEREAS, newborn hearing screening tests can provide important early detection of newborn hearing loss; and

WHEREAS, the evidence for the benefits, practicability, and cost-efficiency of universal newborn hearing screening is so compelling that 38 states have passed legislative mandates requiring that newborns be screened for hearing loss (3); and

WHEREAS, the cost of identifying a newborn with hearing loss is less than 1/10th the cost of identifying newborns with metabolic disorders such as PKU and hypothyroidism, for which screenings are required in every state (4). For most birthing hospitals, the cost for newborn hearing screening per child is between \$20 - \$60 and continues to decrease (5). Most birthing facilities in Alaska implementing newborn hearing screening voluntarily will include it in the total labor and delivery charges; and

WHEREAS, when children are not identified and served early, special education for a child with hearing loss may cost an additional \$420,000, and deafness has an estimated lifetime cost of approximately \$ 1 million per individual (6). These savings in special education costs will pay for universal newborn hearing screening many times over;

THEREFORE BE IT RESOLVED, that the Alaska Public Health Association recognizes the public health benefits of newborn hearing screening for the earliest possible detection and intervention of hearing loss, and encourages the Alaska State Legislature to mandate that all newborns born in Alaska receive universal newborn hearing screening prior to hospital discharge and/or one month of age.

REFERENCES:

- (1) National Center on Hearing Assessment and Management. <http://www.infanthearing.org/presentations/cdc/prevalence.html>
- (2) National Center on Hearing Assessment and Management. <http://www.infanthearing.org/presentations/cdc/prevalence.html>
- (3) National Center on Hearing Assessment and Management. <http://www.infanthearing.org/legislative/index.html#ENACTED>
- (4) Wellness Web. <http://www.wellweb.com/INDEX/OSICKLE.HTM#Head7>
- (5) Grosse S. "Cost comparison of screening newborns for hearing impairment and biochemical disorders." Center for Disease Control and Prevention. Paper presented at the Newborn Screening and Genetics Conference, May 2001.
- (6) Johnson JL, Mauk GW, Takekawa KM, Simon PR, Sia CCF, Blackwell PM. "Implementing a statewide system of services for infants and toddlers with hearing disabilities." *Seminars in Hearing*. 1993; 14: 105-119.

Fiscal Impact:

If this resolution is passed, ALPHA will incur minimal telephone and mailing costs to distribute the resolution.