Public Law 111–337  
111th Congress  

An Act  

To amend the Public Health Service Act regarding early detection, diagnosis, and treatment of hearing loss.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.  

This Act may be cited as the "Early Hearing Detection and Intervention Act of 2010".

SEC. 2. EARLY DETECTION, DIAGNOSIS, AND TREATMENT OF HEARING LOSS.  

Section 399M of the Public Health Service Act (42 U.S.C. 280g–1) is amended—

(1) in the section heading, by striking "INFANTS" and inserting "NEWBORNS AND INFANTS";  

(2) in subsection (a)—  

(A) in the matter preceding paragraph (1), by striking "screening, evaluation and intervention programs and systems" and inserting "screening, evaluation, diagnosis, and intervention programs and systems, and to assist in the recruitment, retention, education, and training of qualified personnel and health care providers,";  

(B) by amending paragraph (1) to read as follows:  

"(1) To develop and monitor the efficacy of statewide programs and systems for hearing screening of newborns and infants; prompt evaluation and diagnosis of children referred from screening programs; and appropriate educational, audiological, and medical interventions for children identified with hearing loss. Early intervention includes referral to and delivery of information and services by schools and agencies, including community, consumer, and parent-based agencies and organizations and other programs mandated by part C of the Individuals with Disabilities Education Act, which offer programs specifically designed to meet the unique language and communication needs of deaf and hard of hearing newborns, infants, toddlers, and children. Programs and systems under this paragraph shall establish and foster family-to-family support mechanisms that are critical in the first months after a child is identified with hearing loss."; and  

(C) by adding at the end the following:  

“(3) Other activities may include developing efficient models to ensure that newborns and infants who are identified with a hearing loss through screening receive follow-up by a qualified health care provider, and State agencies shall be encouraged..."
to adopt models that effectively increase the rate of occurrence of such follow-up.

(3) in subsection (b)(1)(A), by striking “hearing loss screening, evaluation, and intervention programs” and inserting “hearing loss screening, evaluation, diagnosis, and intervention programs”;

(4) in paragraphs (2) and (3) of subsection (c), by striking the term “hearing screening, evaluation and intervention programs” each place such term appears and inserting “hearing screening, evaluation, diagnosis, and intervention programs”;

(5) in subsection (e)—

(A) in paragraph (3), by striking “ensuring that families of the child” and all that follows and inserting “ensuring that families of the child are provided comprehensive, consumer-oriented information about the full range of family support, training, information services, and language and communication options and are given the opportunity to consider and obtain the full range of such appropriate services, educational and program placements, and other options for their child from highly qualified providers.”; and

(B) in paragraph (6), by striking “, after rescreening,”;

and

(6) in subsection (f)—

(A) in paragraph (1), by striking “fiscal year 2002” and inserting “fiscal years 2011 through 2015”; 

(B) in paragraph (2), by striking “fiscal year 2002” and inserting “fiscal years 2011 through 2015”; and

(C) in paragraph (3), by striking “fiscal year 2002” and inserting “fiscal years 2011 through 2015”.

Approved December 22, 2010.