Reauthorization of the Early Hearing Detection and Intervention Act
How Did EHDI Come to be?

- Early Hearing Detection and Intervention grants were first authorized in the Newborn Infant Hearing Screening and Intervention Act of 1999, which was incorporated into the Consolidated Appropriations Act of 2000, and signed into law.
  - That law provided federal funds for state grants to develop infant hearing screening and intervention programs.
- Congress reauthorized these grants through the Children's Health Act of 2000 (P.L. 106-310) and included provisions related to early hearing screening and evaluation of all newborns, coordinated intervention, rehabilitation services, and research.
- In 2010, Congress passed the Early Hearing Detection and Intervention Act of 2010, which authorized these programs through 2015.
What does the EHDI Act actually say and do?

- Statewide newborn and infant hearing screening, evaluation and intervention programs and systems
  - Tasked the Health Resources and Services Administration (HRSA) 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
  - HRSA also collects data on statewide newborn and infant hearing screening, evaluation and intervention programs and systems that can be used for applied research, program evaluation and policy development
What does the EHDI Act actually say and do?

- Technical assistance, data management, and applied research
  - The Centers for Disease Control and Prevention (CDC) is to make awards of grants or cooperative agreements to provide technical assistance to State agencies to complement an intramural program and to conduct applied research related to newborn and infant hearing screening, evaluation and intervention programs and systems
  - The Director of the National Institutes of Health, acting through the Director of the National Institute on Deafness and Other Communication Disorders, shall for purposes of this section, continue a program of research and development on the efficacy of new screening techniques and technology, including clinical studies of screening methods, studies on efficacy of intervention, and related research
What does the EHDI Act actually say and do?

- Authorizes appropriations for hearing screening programs and research Fiscal Years designated (through 2015)
Why do We Need Reauthorization?

- The programs are authorized for funding through 2015, meaning we need to pass a new piece of legislation before the end of this year to ensure future funding for EHDI
- Why isn’t EHDI authorized forever?
  - Congress wants the opportunity to review programs and make sure they are working as intended
  - It gives the hearing health community an opportunity to refocus the law and concentrate on what needs the most attention
Where Are we for 2015 Reauthorization?

• Starting last summer, a coalition of hearing health organizations came together to start envisioning what we would like to see in EHDI reauthorization.

• That group worked to build upon the old legislation and see where improvements could be made.

• After a final draft with all of the organization’s approval was created, we brought it to a member of Congress who had expressed interest in championing the legislation.

• That Member then sends it to “Legislative Counsel” who reviews language and makes sure it is a feasible endeavor.
Where Are we for 2015 Reauthorization?

• Reauthorization has been introduced in the House by Representative Guthrie (R-KY) and Representative Capps (D-CA) – H.R. 1344
• A Senator will need to introduce the legislation for the Senate Chamber as well and that will be reviewed by the Health, Education, Labor, and Pensions Committee
• At any time after a bill is introduced other members of Congress can sign on to the legislation and become “cosponsors” which shows support for a piece of legislation
What Changes Will be in the New Reauthorization?

- Addition of the term “young children” those covered by the law
- More specificity to the roles of HRSA, CDC and NIH
- More of a focus on loss to follow-up
- Allows for a Technical Resource Center in the Maternal and Child Health Bureau of HRSA to
  - provide technical support and education for States; and
  - to continue development and enhancement of State early hearing detection and intervention programs
- Authorizes funds for FY2017-2022
- You can find the bill text here: https://www.congress.gov/bill/114th-congress/house-bill/1344?q={%22search%22%3A[%22hr+1344%22]}
What Impact Will these Changes Have?

• By clarifying the roles of HRSA and CDC it allows them function with better efficiency
• The Technical Assistance Center will allow HRSA to better serve the states
• By adding young children the purview of the law is expanded to cover more children with hearing loss
What is the Prognosis for Moving Forward?

• It’s impossible to foretell the future with Congress but we’ll try
• This legislation is bipartisan and well liked – if considered, it is likely to pass
• Likely to be considered under suspension which is, in the House, a procedure that streamlines consideration of a measure with wide support by prohibiting floor amendments, limiting debate to 40 minutes, and requiring a two-thirds majority for passage
• However, Congress has many competing interests and issues to deal with
• Congress needs to know and hear about the importance of this legislation
How Can We be Involved?

- Lots of ways!
- Write your members of Congress via ASHA’s Take Action site
  - ASHA’s Student Virtual Advocacy day April 21
    http://www.asha.org/nsslha/events/virtual-advocacy-day/
- Visit your members of Congress locally if you cannot come to DC
- Invite your members of Congress to visit your facility
- Tweet and Facebook your members of Congress about the law
Questions?

- Issue Briefs
  - http://www.asha.org/Advocacy/Issue-Briefs/
- ASHA Take Action Site
  - www.takeaction.asha.org
- Feel free to contact:
  Caroline Goncalves Jones
  Associate Director of Federal Advocacy
  Cgoncalvesjones@asha.org
How to Be an Effective Advocate
What is Advocacy?

- There is a misconception that Advocacy means a trip to Capitol Hill and that is only happens in Washington, DC
- Advocacy happens at the local, state and federal level
- You have the power to be very involved if you want to be
Why Should I get Involved?

• Your participation is very important!
• When you contact members of Congress, you provide them with vital information they need to make important public policy decisions
• According to the Congressional Management Foundation, in-person issue visits from constituents are the biggest influence on members of Congress’s decision-making
Who knows the issue better than you?

- You are the experts!
- If Members of Congress don’t hear about an issue from constituents, they have no reason to be concerned with it
- You can provide personal stories and context about how issues directly impact your state and their constituents
How can I be an Advocate?

• E-advocacy
  - Write your members of Congress through pre-written letters that you have the opportunity to edit
  - Get involved on social media by interacting with your members of Congress
How Can I be an Advocate?

- Request an appointment with your member of Congress’s district office to talk about the issues
- Invite them to tour your facility and see EHDI work firsthand
You have help if you want it...

- Organizations such as ASHA have dedicated Government Relation staff who will provide you with materials so you are well prepared for any type of Congressional visit