

Special communication

The case to fund universal newborn hearing screening in New York State

Universal newborn hearing screening is a method to identify, as early as possible, congenital deafness and hearing loss. With this program, all babies are screened before discharge from the hospital nursery. Early identification of hearing loss is essential to prevent later speech, language, social, and school problems. Recent studies by Dr Christine Yoshinaga-Itano of the University of Colorado (Boulder) and others show that when babies receive hearing aids before they are 6 months old, they develop speech and language abilities consistent with their intelligence. Delays are prevented. And newborn hearing screening costs only \$25 per baby.

In April 1999 the American Academy of Pediatrics reiterated its support for newborn hearing screening, because it has been clearly demonstrated that the technology is accurate, there is no other way to reliably identify the condition, its costs are reasonable, and it produces documented benefits. A total of 30 states have laws for universal newborn hearing screening. Twelve of these states, including New York, passed their legislation during 1999.

Unfortunately, the New York State bill (A04152) does not include a mechanism to pay for the screening program. It is not clear whether the state will provide the funding, require Medicaid and insurance companies to pay, and/or pass the cost along to the hospitals that do the screening.

In 1995, the state Department of Health began a 3-year pilot program to test the feasibility of

newborn hearing screening at seven sites geographically dispersed across New York. Despite the clear success of the pilot program, when the demonstration period ended, state funding ceased. Some of the participating hospitals continue to screen newborns, but must absorb the cost.

Data from the state pilot program show that the identification rate of all types of hearing loss is four per 1000. With nearly 257,000 annual live births in the state, newborn hearing screening will ensure the identification of 1000 deaf or seriously hearing impaired babies every year. When hearing loss is missed in the neonatal period, it is generally not identified until the child is 30 months old. This has a profound impact on speech–language development and later school performance, because the child will not have been able to hear adequately during the most critical period of brain growth and language development. There is no way to make up for this missed opportunity. It is almost inevitable that the child will require special education at school age.

Statewide, special education costs nearly \$7000 per year more than regular education. In New York City, special education is more than triple the cost of general education, nearly \$9000 additional per year. Once in special education, in New York City, 97 of 100 children remain there year after year. So these additional costs will continue, and the amount per year will increase every year as more babies who have been screened reach school age.

Newborn hearing screening can be predicted to keep 1000 children out of special education every year. That is an annual saving of \$7.9 million, for each year of the children's public education. The cost of screening every newborn in New York State is \$6.4 million. And, according to Advocates for Children of New York City, children in special education are more likely to remain in high school until age 21 and less likely to graduate with an academic diploma (and adequate preparation for the job market). Surely New York State can afford to spend \$6.4 million a year to screen every baby for hearing loss and

prevent problems that will harm them for their entire life-especially when we the taxpayers will save millions of dollars every year thereafter in the process!

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