



## EHD State and Territorial Profiles Wisconsin

This profile includes information about a state or territorial EHD program related to general program information, hearing screening, re-screening and diagnostic evaluations, early intervention, and the EHD data system.

*If any information in this profile is incorrect or needs to be updated please email: [ehdi@cdc.gov](mailto:ehdi@cdc.gov)*

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Category and Questions	Information
<b>General Program Information</b>	
Official name of the state/territory Early Hearing Detection and Intervention (EHD) program	Wisconsin Sound Beginnings
Contact for the state/territory EHD program.	Elizabeth Seeliger, M.A., CCC-A Wisconsin Sound Beginnings Program Director Wisconsin Department of Health & Family Services BCHP 1 W. Wilson St. P.O. Box 7851 Madison, WI 53707-7851 608-267-9191 608-267-3824 <a href="mailto:seeliel@dhfs.state.wi.us">seeliel@dhfs.state.wi.us</a>
Legislation regarding newborn hearing screening?  If yes, does the legislation mandate or provide funds for newborn hearing screening and follow-up services?	Yes Legislation (253.115) was passed in 1999 about newborn hearing screening. The legislation language does not mandate screening. Rather, it specifically reads that, "beginning July 1, 2002, the department shall annually collect information from hospitals for the previous calendar year concerning the numbers of deliveries in each hospital and the availability in each hospital of newborn hearing screening program." By January 1, 2004, every hospital shall have a newborn hearing screening program.  No language has been passes that addresses reimbursement for screening and/or follow-up activities.
State/territory website related to	Yes

<p>infant/child hearing loss?</p>	<p><a href="http://www.perinatalweb.org/images/stories/PDFs/Materials%20and%20Publication/UNHS%20Newsletter%20Issue%206.pdf">http://www.perinatalweb.org/images/stories/PDFs/Materials%20and%20Publication/UNHS%20Newsletter%20Issue%206.pdf</a></p>
<p>State/territory CDC/EHDI Cooperative Agreement related to hearing screening?</p>	<p>Yes  The CDC grant has been used to develop the Wisconsin EHDI Tracking Referral and Coordination System (WE-TRAC). WE-TRAC is a web-based data collection and tracking system. Hospitals have been reporting hearing screening data to the State Lab of Hygiene (SLH) using newborn blood screening cards since April 2002. Wisconsin's WE-TRAC system was released in October, 2005 . The electronic system supports the timing and programmatic workflow identified by the JCIH. Once hearing screening results are sent to the SLH they are messaged over to the WE-TRAC database nightly. If the baby passed the screening on both ears they are archived into the WE-TRAC database for future aggregate data reporting. If the baby did not pass or if information is missing on the blood card, information is transferred to the hospital's WE-TRAC queue. They can then enter outpatient screening results, refer for the next recommended procedure, or enter lost to follow-up. If a referral is entered, the baby's information then moves off of the initial queue and onto the referral organization's queue. The WE-TRAC administrators receive notification if a baby needs further follow-up.</p>
<p>State/territory have a Maternal and Child Health Bureau Grant related to hearing screening?</p>	<p>Yes.  The Children and Youth with Special Health Care Needs (CSHCN) program in the Wisconsin Department of Health and Family Services (DHFS) has received federal Maternal and Child Health Bureau funding to implement Wisconsin's Early Hearing Detection and Intervention (EHDI) program, Wisconsin Sound Beginnings (WSB). The WSB mission is to develop a program infrastructure to ensure that all babies born in Wisconsin have access to universal newborn hearing screening (UNHS) and comprehensive and timely follow-up care.</p>
<p>Participate in a CDC funded research project?</p>	<p>No</p>
<p><b>Hearing Screening Information</b></p>	
<p>State/territory written guidelines and/or protocols for performing hearing screenings?</p>	<p>Yes</p>
<p>Primarily responsible in most hospitals for conducting in-hospital hearing screenings?</p>	<p>Nurses  Registered Nurses = 73% Nursing Assistants = 28% Licensed Audiologists = 18% Certified Audiometric Technician = 3% Other Personnel = 23%</p>
<p>Estimated percentage of newborns that are initially screened with OAE or AABR.  (Of the newborns that failed the initial screen, estimated percentage that are re-screened</p>	<p>NICU Screening: OAE____%; AABR_____%   WBN Screening: OAE____%; AABR_____%</p>

<p>in the hospital with OAE or AABR.)</p>	<p>NICU Re-screening: OAE____%; AABR____%</p> <p>WBN Re-screening: OAE____%; AABR____%</p>
<p>State/territory requires parental consent for hearing screening(s) to be done at the time of birth?</p>	<p>Yes</p>
<p>What happens if a baby does not pass the initial hearing screening(s)?</p>	<p>Re-screen in hospital before discharge (specify by technology if known), Re-screen as outpatient (specify by technology if known), Referred for diagnostic audiological evaluation. This protocol varies greatly from hospital to hospital. Hospital size, number of births, staffing, screening technology all influence hospital protocol.</p>
<p>Birthing hospitals/facilities/providers required to report hearing screening results to the state?</p>	<p>Yes Hearing screening information is recorded on the metabolic screening card at the hospital and sent to the WI State Laboratory of Hygiene (SLH). The results are entered into the SLH database and messaged over nightly to the WE-TRAC data system. The fields related to hearing screening that are recorded on the metabolic screening card are hearing results, screening date, and reason not screened.</p>
<p>How birthing hospitals/facilities report hearing screening information to the state/territory</p>	<p>Blood spot cards WI started collecting hearing screening data on the Blood Spot card in April of 2002</p>
<p>Hearing screening results reported to the infant's physician? [If yes, are all results reported or only failed screening?]</p>	<p>This procedure varies from hospital to hospital.</p>
<p><b>Rescreening and Diagnostic Evaluations</b></p>	
<p>State/territory written guidelines and/or protocols for performing hearing re-screenings?</p>	<p>No – we refer to the best practices as outlined in the JCIH position statement 2007</p>
<p>State's program guidelines for helping families with third party preauthorization of re-screening or diagnostic evaluations?</p>	<p>No</p>
<p>State/territory written guidelines and/or protocols for performing diagnostic evaluations?</p>	<p>Yes The document is titled Babies and Hearing Loss: A Guide for Providers about Follow-up Medical Care.</p>
<p>State/territory EHDI program list of audiologic diagnostic centers and audiologists skilled in providing pediatric services to</p>	<p>Yes Have an index of audiologists classified into three levels of diagnostic abilities. The list does not indicate "pediatric certification" or endorsement by the State of WI. We do not have certified diagnostic centers in Wisconsin.</p>

infants?	
Number of pediatric audiologists and/or diagnostic centers on the list	35 audiologists – no centers
Who is responsible for scheduling appointments for outpatient hearing re-screenings?	Varies by hospital but Wisconsin Sound Beginnings promotes the making of follow-up appointments prior to discharge from the hospital as best practice
Who is responsible for scheduling appointments for diagnostic audiologic evaluations?	The family is largely held responsible for making this appointment.
How audiologists report diagnostic audiological evaluation results to the state/territory	Audiologists are filing Confirmation of Hearing Loss Reports to the Wisconsin Sound Beginnings Program either through WE-TRAC or via paper forms for babies born outside of WI.
Guidelines and/or protocols for audiologists to report diagnostic audiological evaluation results to the state/territory?	Yes
One or more persons on the EHDI staff who are responsible for the follow-up of families who need to return for re-screen, diagnostics, or referral to intervention?	Yes Sound Beginnings has a Follow-through Coordinator
<b>Early Intervention</b>	
Lead agency for the Part C Early Intervention Program	Health and Family Services Carol Noddings Eichinger, Part C Coordinator <a href="mailto:eichicn@dhfs.state.wi.us">eichicn@dhfs.state.wi.us</a>
State/territory written guidelines, and/or protocols for providing intervention services for children with hearing loss?	Yes, there is a best practices document written for EI services of infants and toddlers who are deaf or hard of hearing
Eligibility criteria for Part C services for infants and toddlers with hearing loss	There is no specific degree or configuration restrictions. It is up to the team to decide eligibility but hearing loss is considered an eligible condition.
Eligibility criteria for Part B services for preschool children with hearing loss	<i>No information currently available</i>
Children with mild or unilateral hearing loss eligible for services under Part C or Part B?	Yes, both
Other public or private programs(s) and services (other	<i>No information currently available</i>

than Part C or Part B) that provide intervention services to children with hearing loss	
Services such as family support, transportation to follow-up appointments, parent to parent available to families with children with hearing loss? List.	Guide-by-Your-Side (GBYS) program is designed to provide emotional support and specialized knowledge from trained parents of children who are deaf or hard of hearing
Program receives information regarding whether or not a referred child is receiving Part C services or other intervention services?	Yes
Intervention programs report other information about children, such as type of intervention, developmental test scores, use of assistive devices?	Not at this time
<b>EHDI Data System</b>	
State/territory written guidelines and/or protocols related to the EHDI tracking system?	No
Type of system program uses to track hearing screening and follow-up information. .	WE-TRAC is a web-based data collection and tracking system developed by state personnel.
State EHDI tracking system includes data items to identify infants and children with risk factors for hearing loss?	Yes
Unique identifier is used to identify infants/children in the state/territory EHDI tracking system	Blood card ID
How program addresses de-duplication of screening and diagnostic evaluation data	There is a complex deduplication algorithm plus human intervention on cases that are too close to call.
EHDI system linked to or integrated with any of the following: -Blood spot card -EBC	Blood spot card, Audiology, soon with early intervention

<p>-Audiology -Early Intervention -Immunizations -Other</p>	
<p><b>Other EHDI Questions</b></p>	
<p>State materials/ brochures/ protocols for parents and professionals about the EHDI program. (Link to matrix).</p>	<p>Yes <a href="http://www.cdc.gov/ncbddd/ehdi/statesclearinghouse/wisconsin.htm">http://www.cdc.gov/ncbddd/ehdi/statesclearinghouse/wisconsin.htm</a></p>
<p>Agencies, foundations, organizations, or other programs that provide funding for the purchase of any of the assistive devices for children with hearing loss</p>	<p><i>No information currently available</i></p>
<p>Statewide hearing aid loaner program for infants, toddlers, and children with hearing loss?</p>	<p>No</p>
<p>Resources, other than those from the state or territory, available to help families with the costs of caring for an infant, toddler, or child with a hearing loss?</p>	<p><i>No information currently available</i></p>