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EHDI State and Territorial Profiles Iowa

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

If any information in this profile is incorrect or needs to be updated please email: ehdi@cdc.gov

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Category and Questions	Information
General Program Information	
Official name of the state/territory Early Hearing Detection and Intervention (EHDI) program	Iowa Early Hearing Detection and Intervention System (IAEHDI)
Contact for the state/territory EHDI program.	Tammy O'Hollearn, LBSW Community Health Consultant Iowa Department of Public Health Lucas State Office Bldg., 5th Floor 321 East 12th Street Des Moines, IA 50319-0075 (515) 242-5639 (515) 242-6013 tohollea@idph.state.ia.us
Legislation regarding newborn hearing screening? If yes, does the legislation mandate or provide funds for newborn hearing screening and follow-up services?	Yes, A bill was signed in May 2003, mandating that all birthing hospitals screen all newborns. It also mandated the reporting of individual level data by hospitals and providers, such as audiologists, including re-screen results and diagnoses of hearing loss in a child 0-3.
State/territory website related to infant/child hearing loss?	Yes. http://www.idph.state.ia.us/iaehdi
State/territory CDC/EHDI Cooperative Agreement related to	Yes

hearing screening?	
State/territory have a Maternal and Child Health Bureau Grant related to hearing screening?	Yes
Participate in a CDC funded research project?	No
Hearing Screening Information	
State/territory written guidelines and/or protocols for performing hearing screenings?	Yes. Copy available upon request or at Iowa EHDI website Newborn hearing screening protocol provides guidance. Protocol for re-screening children with "high risk factors" will be developed following release of final JCIH statement (06-07).
Primarily responsible in most hospitals for conducting in-hospital hearing screenings?	Most hospitals are using nurses, but some use audiologists, audiology assistants, or other health professionals to conduct the screenings.
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 in the hospital with OAE or AABR.)	NICU Screening: OAE__84__%; AABR__16__% WBN Screening: OAE__93__%; AABR__7__% NICU Re-screening: OAE__47__%; AABR__53__% WBN Re-screening: OAE__79__%; AABR__21__%
State/territory require parental consent for hearing screening(s) to be done at the time of birth?	No. The Iowa universal newborn hearing screening law requires all hospitals to screen infants prior to discharge. Parents must actively refuse and sign a refusal form if they do not wish to have their child screened.
What happens if a baby does not pass the initial hearing screening(s)?	Re-screen in hospital before discharge using OAE (small hospitals) or AABR (hospitals with NICU). Re-screen as outpatient using both OAE and AABR. Re-screens are available at some hospitals, pediatrician offices, Area Education Agencies, and private practice audiology clinics.
Birthing hospitals/facilities/providers required to report hearing screening results to the state?	Yes Required information includes: Screening location, Infant's name, Date of birth, Medical Record Number, Mother/Guardian's Name, Address, and Phone, Type of screening technology, Screening results for each ear, Primary Care Physician/Medical Home, Date of re-screen or assessment
How birthing hospitals/facilities report hearing screening information to the state/territory	98% of hospitals report individual screening data to the EHDI program using eScreener Plus (79 of 81) and 2% by paper form (2 of 81). In addition to hospitals, there are 10 Area Education Agencies that report screening and diagnostic data using our Web based data system. There are approximately 15 additional facilities such as pediatrician

	offices, ENT offices, private practice that report using paper forms. Most likely the number of additional facilities will increase, including the number that report using the Web based data system vs. paper reports.
Hearing screening results reported to the infant's physician? [If yes, are all results reported or only failed screening?]	Most hospitals report the results of the infants newborn hearing screen to the infant's physician through discharge summaries, electronic medical records or letters from our Web based data system.
Rescreening and Diagnostic Evaluations	
State/territory written guidelines and/or protocols for performing hearing re-screenings?	Yes, http://www.idph.state.ia.us/iaehdi/professionals.asp
State's program guidelines for helping families with third party preauthorization of re-screening or diagnostic evaluations?	No
State/territory written guidelines and/or protocols for performing diagnostic evaluations?	Yes. Covered as part of administrative rules. If the AEA does not have the capacity to complete a diagnostic evaluation they are required to make an appropriate referral. Go to the following link for the law and administrative rules, http://www.idph.state.ia.us/iaehdi/professionals.asp
State/territory EHDI program list of audiologic diagnostic centers and audiologists skilled in providing pediatric services to infants?	Yes, http://www.idph.state.ia.us/iaehdi/professionals.asp
Number of pediatric audiologists and/or diagnostic centers on the list	11.
Who is responsible for scheduling appointments for outpatient hearing re-screenings?	Primary Care Provider (PCP), Parents or guardians, Department of Health (DOH), Hospitals, Pediatric Nurse Practitioner with Child Health Specialty Clinics, Early ACCESS (IDEA, Part C program) No one by law is required to schedule a re-screen. However, the Iowa EHDI program is working with hospitals, physicians, nurse practitioners to have them schedule the appointments before the child is discharged from the hospital.
Who is responsible for scheduling appointments for diagnostic audiologic evaluations?	Primary Care Provider (PCP), Parents or guardians, Department of Health (DOH), Hospitals, Area Education Agencies, Pediatric Nurse Practitioner with Child Health Specialty Clinics, Early ACCESS (IDEA, Part C program) Diagnostic follow-up is primarily done by the Area Education Agencies (AEA)

How audiologists report diagnostic audiological evaluation results to the state/territory	75% of audiological evaluations are reported via web-based data entry; 25% via paper form.
Guidelines and/or protocols for audiologists to report diagnostic audiological evaluation results to the state/territory?	Yes Administrative Rules The state mandates that audiological evaluations be reported to the EHDI program. IA seeks to obtain audiological evaluation data for all occurrent births below a given age that obtain an audiological evaluation, including children with risk factors.
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?	State EHDI Coordinator (CDC-EHDI Project Coordinator) and EHDI Follow-up Coordinator (HRSA-EHDI Project Coordinator)
Early Intervention	
Lead agency for the Part C Early Intervention Program	Department of Education Julie Curry, State Coordinator julie.curry@iowa.gov
State/territory written guidelines, and/or protocols for providing intervention services for children with hearing loss?	There are written guidelines for providing early intervention services. Early Intervention is made up of the following signatory agencies that all play a role in referral and or service provision: Department of Education, Department of Public Health, Department of Human Services, and Child Health Specialty Clinics (our Children with Special Health Care Needs program).
Eligibility criteria for Part C services for infants and toddlers with hearing loss	All children with any degree of hearing loss.
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.
Other public or private programs(s) and services (other than Part C or Part B) that provide intervention services to children with hearing loss	There are a number of private providers that may provide intervention services to children with hearing loss. In Iowa, EI is made up of the following signatory agencies that all play a role in referral and or service provision: Department of Education, Department of Public Health, Department of Human Services, and Child Health Specialty Clinics (our Children with Special Health Care Needs program).
Services such as family support, transportation to follow-up appointments, parent to parent available to families with children	The EHDI program contracts with a person who serves as a Parent Consultant. This person is responsible for facilitating involvement by parents, coordinating training for families, and providing support to families as needed.

<p>with hearing loss? List.</p>	<p>The EHDI program also has a Guide By Your Side program made up of mentors and/or mentors that are available to assist families and provide unbiased support.</p> <p>Pre-service and service coordinators for Early ACCESS through the AEA's assists families in finding transportation to appointments, as needed.</p>
<p>Program receives information regarding whether or not a referred child is receiving Part C services or other intervention services?</p>	<p>Yes, information is received from Part C (but not other EI providers) on an individual child level if a release has been signed.</p>
<p>Intervention programs report other information about children, such as type of intervention, developmental test scores, use of assistive devices?</p>	<p>No</p>
<p>EHDI Data System</p>	
<p>State/territory written guidelines and/or protocols related to the EHDI tracking system?</p>	<p>eSP User Manual</p> <p>The EHDI QA Committee is in the process of putting together a policy and procedures manual for newborn hearing screening through early intervention referral.</p>
<p>Type of system program uses to track hearing screening and follow-up information. .</p>	<p>IA uses commercial software developed by outside vendor.</p> <p>The Iowa EHDI program contracts with the OZ Corporation for the use and maintenance of the OZ eSP (e-Screener Plus) system, which is web-based. The system includes the minimum data items listed in the 2003 CDC Program Guidance Manual. Hearing screening results and demographic information can be electronically imported into the eSP directly from the screening equipment and hospital electronic medical or admitting records.</p> <p>The IA program obtains birth certificate data for all occurrent births.</p> <p>The IA program receives individual-level data for ALL hearing screens.</p>
<p>State EHDI tracking system includes data items to identify infants and children with risk factors for hearing loss?</p>	<p>Yes</p>
<p>Unique identifier is used to identify infants/children in the state/territory EHDI tracking system</p>	<p>Medical record number.</p>

<p>How program addresses de-duplication of screening and diagnostic evaluation data</p>	<p>The IA program addresses de-duplication of screening and diagnostic evaluation data after data entry, staff search for possible matches.</p> <p>If two records belong to the same individual, it is possible to combine these two records under the same ID number without re-entering all of the data for one of the records; however, if two records have been combined into a single record, but then it is determined that this was an error, it is not possible to “undo” this and re-create the original, separate records under different ID numbers without re-entering the data.</p>
<p>EHDI system linked to or integrated with any of the following:</p> <ul style="list-style-type: none"> -Blood spot card -EBC -Audiology -Early Intervention -Immunizations -Other 	<p>The IA EHDI data system has the ability to integrate some with other state programs, however the EHDI program has a separate data system from other state programs. The IA EHDI data system contains all hearing screening, diagnostic, and service data in one system.</p> <p>As noted, the EHDI data system may obtain uploads from other systems.)</p> <p>The EBC does not yet have any linkage with the eSP system. Requests for linkages and additional features should be accepted by Vital records beginning in 2008. The EHDI program would like to be one of the first programs to be linked to the EBC.</p>
<p>Other EHDI Questions</p>	
<p>State materials/ brochures/ protocols for parents and professionals about the EHDI program. (Link to matrix).</p>	<p>Visit the IA EHDI Web site at www.idph.state.ia.us/iaehdi/default.asp.</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>Lion’s club in local communities sometimes offers grants to help pay for hearing aids for children.</p>
<p>Statewide hearing aid loaner program for infants, toddlers, and children with hearing loss?</p>	<p>Not statewide, but there are a number of programs throughout the state that have hearing aids they are willing to loan to children. In 2007, the Iowa legislation appropriated \$238,500 to the Iowa Department of Public Health to pay for the costs of hearing aids and audiological services not covered by insurance for children. That program will begin accepting applications 2/1/2008.</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>