# EHDI State and Territorial Profiles
## Missouri

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 |
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| **General Program Information** | |
| Official name of the state/territory Early Hearing Detection and Intervention (EHDI) program | Missouri Newborn Hearing Screening Program |
| Contact for the state/territory EHDI program. | Catherine B. Harbison<br>Program Manager<br>Missouri Newborn Hearing Screening Program<br>Missouri Department of Health and Senior Services<br>930 Wildwood Dr.<br>PO Box 570<br>Jefferson City, MO 65102-0570<br>(800) 877-6246<br>573-751-6185<br>catherine.harbison@dhss.mo.gov |
| Legislation regarding newborn hearing screening?<br><br>If yes, does the legislation mandate or provide funds for newborn hearing screening and follow-up services? | Yes.<br>All newborns are required to be screened and all birthing facilities are required to report patient demographics and hearing screening results effective Jan 1, 2002.<br><br>The statute mandates insurance coverage for newborn hearing screenings, necessary re-screening and audiological assessment. Medicaid/SCHIO (up to 300% FPG) provides coverage for approximately forty percent f infants born in MO.  Many smaller private insurance policies have been able to find exception to the coverage of newborn hearing screening services. |
| State/territory website related to infant/child hearing loss? | Yes.<br><br>http://www.dhss.mo.gov/NewbornHearing/ |

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| State/territory CDC/EHDI Cooperative Agreement related to hearing screening? | Yes. |
| 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? | No. If requested, the Missouri Department of Health and Senior Services provides audiological and administrative technical support to facilities and persons implementing a newborn hearing screening program. |
| Primarily responsible in most hospitals for conducting in-hospital hearing screenings? | Each facility operating a newborn hearing screening program determines who performs the hearing screenings for that facility. |
| 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_____%;   AABR_____%  <br><br> WBN Screening: OAE_____%;   AABR_____ _%  <br><br> NICU Re-screening: OAE_____%;   AABR_____%  <br><br> WBN Re-screening: OAE_____%;   AABR_____% |
| State/territory requires parental consent for hearing screening(s) to be done at the time of birth? | No. |
| What happens if a baby does not pass the initial hearing screening(s)? | Each facility operating a newborn hearing screening program establishes its own policies and procedures. However, Missouri law requires a re-screening to be completed within thirty (30) calendar days of the initial newborn hearing screening. |
| Birthing hospitals/facilities/providers required to report hearing screening results to the state? | Yes Each facility, physician or primary care provider who administers a newborn hearing screen, must report the results (pass, refer or miss) of an initial screen or a re-screen to the state. |
| How birthing hospitals/facilities report hearing screening information to the state/territory | The initial hearing screen is recorded on the multi-copy tear out blood spot card. Re-screen results are recorded on state-developed forms. Once all hospitals are trained on the web based entry MOSHAIC newborn hearing web application, the results will no longer be sent on the blood spot forms.<br><br>90%  of individual-level screening results is received on metabolic forms; 10% on paper forms. |

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| Hearing screening results reported to the infant's physician? [If yes, are all results reported or only failed screening?] | Notify all screening results ("Refer" and Pass) Missouri legislation requires all birth facilities to report all screening results to the infant's physician. |
| **Rescreening and Diagnostic Evaluations** | |
| State/territory written guidelines and/or protocols for performing hearing re-screenings? | No. |
| State's program guidelines for helping families with third party preauthorization of re-screening or diagnostic evaluations? | *No information currently available* |
| State/territory written guidelines and/or protocols for performing diagnostic evaluations? | Yes The Missouri Department of Health and Senior Services (DHSS) developed guidelines for audiologists who provide audiological dianostic service to infants referred from newborn hearing screeing programs. |
| State/territory EHDI program list of audiologic diagnostic centers and audiologists skilled in providing pediatric services to infants? | Yes. http://www.dhss.mo.gov/NewbornHearing//ResourceGuideWhole.pdf |
| Number of pediatric audiologists and/or diagnostic centers on the list | 44 diagnostic centers 102 audiologists |
| Who is responsible for scheduling appointments for outpatient hearing re-screenings? | Parents or guardians |
| Who is responsible for scheduling appointments for diagnostic audiologic evaluations? | *No information currently available* |
| How audiologists report diagnostic audiological evaluation results to the state/territory | 60% of audiological evaluations are reported via paper form; 40% by web-based data entry. |
| Guidelines and/or protocols for audiologists to report diagnostic audiological evaluation results to the state/territory? | Yes. MO law requires audiologists to report all diagnostic audiologic assessment results to the EHDI program for children referred from the newborn hearing screen to the Missouri Department of Health and Senior Services via a state-designed report form, found on the state web site. MO 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? | *No information currently available* |
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| **Early Intervention** | |
| Lead agency for the Part C Early Intervention Program | Department of Elementary and Secondary Education (DESE)<br><br>Joyce Jackman, Coordinator<br><br>joyce.jackman@dese.mo.gov |
| State/territory written guidelines, and/or protocols for providing intervention services for children with hearing loss? | *No information currently available* |
| Eligibility criteria for Part C services for infants and toddlers with hearing loss | *No information currently available* |
| Eligibility criteria for Part B services for preschool children with hearing loss | *No information currently available* |
| Children with mild or unilateral hearing loss eligible for services under Part C or Part B? | *No information currently available* |
| Other public or private programs(s) and services (other than Part C or Part B) that provide intervention services to children with hearing loss | *No information currently available* |
| Services such as family support, transportation to follow-up appointments, parent to parent available to families with children with hearing loss? List. | *No information currently available* |
| Program receives information regarding whether or not a referred child is receiving Part C services or other intervention services? | Yes--some or all is in aggregate form from Part C but not other EI providers. First Steps is legislatively mandated to report to DHSS information of the delivery of EI services to infants identified by the newborn hearing Programs. The new web-based system will provide more detailed information for collection and analysis.  Outcome data listed on the IFSP is available and included in the annual report. |
| Intervention programs report other information about children, such as type of intervention, developmental test scores, use of assistive devices? | Due to FERPA, DESE only shares aggregate data with newborn hearing screening program.  The program is in discussion about obtaining parent's consent by way of the service coordinator.  There is an MOU in development. The system will track all services will track services provided, as well as programs in which the child is enrolled, such as when transition occurs from Part C to B. Information is not |

| | received from other EI providers. |
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| **EHDI Data System** | |
| State/territory written guidelines and/or protocols related to the EHDI tracking system? | Yes.<br>Staff developed an internal policy and procedure manual related to the Missouri EHDI tracking system. |
| Type of system program uses to track hearing screening and follow-up information. . | The MO program is part of an integrated state data system. MO has a web-based newborn hearing module, implemented in 2004.  The newborn hearing screening application is part of the Missouri Health Strategic Architectures and Information Cooperative (MOHSAIC).  Hospitals and audiologists will enter screening results.  MDHSS staff enters the follow-up results.<br><br>MOHSAIC assigns a random number to each patient which can link up with the unique client number, called a Department Client Number (DCN).<br><br>The MO program obtains birth certificate data for all occurrent births.<br><br>The MO program receives individual-level data for ALL hearing screens. |
| 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 | Number generated by the data system: Department Client Number (DCN) |
| How program addresses de-duplication of screening and diagnostic evaluation data | De-duplication of screening and diagnostic evaluation data are addressed during data entry, staff search for possible matches.  If two records belong to the same individual, or if two records have been combined into a single record, it is possible to fix the error without re-entering the data. |
| EHDI system linked to or integrated with any of the following:<br><br>-Blood spot card<br><br>-EBC<br><br>-Audiology<br><br>-Early Intervention<br><br>-Immunizations<br><br>-Other | MO has an integrated state data system (i.e., EHDI is only one piece in a larger system that includes other programs<br><br>Demographic information such as mother and child's names, date of birth, hospital of birth and gender are present on the laboratory form and in the MOHSAIC hearing screening database.<br><br>Hearing screening results will be submitted via the EBC on January 1, 2007.<br><br>Immunization and the birth defects registry will be added to the system |
| **Other EHDI Questions** | |
| State materials/ brochures/ | Yes. |

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| protocols for parents and professionals about the EHDI program. (Link to matrix). | http://www.cdc.gov/ncbddd/ehdi/statesclearinghouse/missouri.htm |
| Agencies, foundations, organizations, or other programs that provide funding for the purchase of any of the assistive devices for children with hearing loss | First Steps provides funding for amplification devices or other assistive technology. |
| Statewide hearing aid loaner program for infants, toddlers, and children with hearing loss? | *No information currently available* |
| 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? | *No information currently available* |