

## Early Hearing Detection and Intervention Act of 2022

[Public Law 117–241]

[This law has not been amended]

【Currency: This publication is a compilation of the text of Public Law 117–241. It was last amended by the public law listed in the As Amended Through note above and below at the bottom of each page of the pdf version and reflects current law through the date of the enactment of the public law listed at <https://www.govinfo.gov/app/collection/comps/>】

【Note: While this publication does not represent an official version of any Federal statute, substantial efforts have been made to ensure the accuracy of its contents. The official version of Federal law is found in the United States Statutes at Large and in the United States Code. The legal effect to be given to the Statutes at Large and the United States Code is established by statute (1 U.S.C. 112, 204).】

AN ACT To reauthorize a program for early detection, diagnosis, and treatment regarding deaf and hard-of-hearing newborns, infants, and young children, and for other purposes.

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

### SECTION 1. [42 U.S.C. 201 note] SHORT TITLE.

This Act may be cited as the “Early Hearing Detection and Intervention Act of 2022”.

### SEC. 2. REAUTHORIZATION OF PROGRAM FOR EARLY DETECTION, DIAGNOSIS, AND TREATMENT REGARDING DEAF AND HARD-OF-HEARING NEWBORNS, INFANTS, AND YOUNG CHILDREN.

Section 399M of the Public Health Service Act (42 U.S.C. 280g-1) is amended—

(1) in subsection (e), by inserting “(3)” before “The term ‘medical evaluation’”; and

(2) in subsection (f)—

(A) in paragraph (1), by striking “\$17,818,000 for fiscal year 2018, \$18,173,800 for fiscal year 2019, \$18,628,145 for fiscal year 2020, \$19,056,592 for fiscal year 2021, and \$19,522,758 for fiscal year 2022” and inserting “\$17,818,000 for each of fiscal years 2023 through 2027”; and

(B) in paragraph (2), by striking “\$10,800,000 for fiscal year 2018, \$11,026,800 for fiscal year 2019, \$11,302,470 for fiscal year 2020, \$11,562,427 for fiscal year 2021, and \$11,851,488 for fiscal year 2022” and inserting “\$10,760,000 for each of fiscal years 2023 through 2027”.

**SEC. 3. GAO STUDY ON STATE EARLY HEARING DETECTION AND INTERVENTION PROGRAMS.**

(a) **IN GENERAL.**—The Comptroller General of the United States shall conduct a study reviewing State early hearing detection and intervention (in this section referred to as “EHDI”) programs. Such study shall—

(1) analyze how information collected through such programs informs what is known about EHDI activities to ensure that newborns, infants, and young children have access to timely hearing screenings and early interventions, including information on any disparities in such access;

(2) analyze what is known about how parents use State EHDI websites to seek health and programmatic guidance related to their child’s hearing loss diagnosis; and

(3) identify efforts and any promising practices of the Centers for Disease Control and Prevention, the Health Resources and Services Administration, the National Institute on Deafness and Other Communication Disorders, and State EHDI programs—

(A) to address disparities in outreach for, or access to, timely hearing screenings and early interventions; and

(B) to ensure that EHDI follow-up services are communicated and made available to medically underserved populations, including racial and ethnic minorities.

(b) **REPORT.**—Not later than 2 years after the date of the enactment of this Act, the Comptroller General shall—

(1) complete the study under subsection (a) and submit a report on the results of the study to—

(A) the Committee on Energy and Commerce of the House of Representatives; and

(B) the Committee on Health, Education, Labor, and Pensions of the Senate; and

(2) make such report publicly available.