



ASHA
American
Speech-Language-Hearing
Association

October 27, 2020

The Honorable Russell T. Vought
Director
Office of Management and Budget
725 17th Street, NW
Washington, DC 20503

Dear Mr. Vought:

On behalf of the American Speech-Language-Hearing Association (ASHA), I write to express my alarm concerning an [article by Politico](#) dated October 20, 2020, detailing that the Department of Health and Human Services (HHS) has provided a report to the Office of Management and Budget (OMB) proposing cuts to grants for universal newborn hearing screenings in the District of Columbia. The hearing health of newborn children should never be put at risk no matter where in the United States they live.

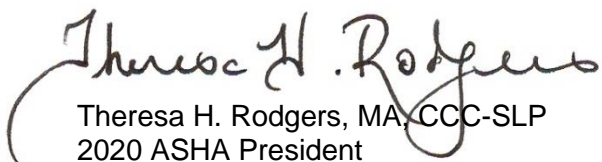
The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for 211,000 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students. Audiologists specialize in preventing, assessing, and treating hearing and balance disorders. Speech-language pathologists identify, assess, and treat speech, language, swallowing, and cognitive impairments.

The funds proposed to be cut are from the Early Hearing Detection and Intervention (EHDI) Act. EHDI is one of the nation's most important public health programs, offering early hearing screening and interventions to all newborns, infants, and young children in all 50 states and the District of Columbia. EHDI has proven itself to be highly successful. When the Child Health Act of 2000—which established the state-based universal newborn hearing screening programs—was passed, only 46.5% of newborns were being screened for hearing loss. Yet, with today's programs, approximately 98% of newborns receive an audiologic screening, totaling 3.7 million infants and children in the year 2018 alone.¹

Cuts to EHDI grants may leave children with undiagnosed hearing loss and deprive deaf and hard of hearing children from receiving follow-up services that improve language skills and development. When hearing loss is detected late, the critical time for stimulating the auditory pathways to hearing centers of the brain is lost. Late hearing loss detection also delays speech and language development affecting social and emotional growth, academic achievement, and employment options.

I urge you to reject any cuts to EHDI initiatives, and support the continued success of the EHDI program, ensuring that infants and toddlers with hearing loss receive the timely and appropriate services they deserve. If you or your staff have any questions, or require further information, please contact Erik Lazdins, ASHA's associate director of federal affairs, at elazdins@asha.org.

Sincerely,



Theresa H. Rodgers, MA, CCC-SLP
2020 ASHA President

¹ 2018 CDC EHDI Hearing Screening & Follow-up Survey (HSFS), Centers for Disease Control and Prevention, May 2020, available at: https://www.cdc.gov/ncbddd/hearingloss/2018-data/documents/02_2018-HSFS_Screen.pdf.