

COMMITTEE AMENDMENT
HOUSE OF REPRESENTATIVES
State of Oklahoma

SPEAKER:

CHAIR:

I move to amend HB2188 _____
Of the printed Bill
Page _____ Section _____ Lines _____
Of the Engrossed Bill

By deleting the content of the entire measure, and by inserting in lieu
thereof the following language:
Meloyde.blancett

AMEND TITLE TO CONFORM TO AMENDMENTS

Amendment submitted by: Meloyde Blancett

Adopted: _____

Reading Clerk

STATE OF OKLAHOMA

1st Session of the 60th Legislature (2025)

PROPOSED POLICY
COMMITTEE SUBSTITUTE
FOR
HOUSE BILL NO. 2188

By: Blancett

PROPOSED POLICY COMMITTEE SUBSTITUTE

An Act relating to schools; requiring hearing screening for certain students within certain timeframe; specifying screenings be conducted by certain personnel; providing for notification of certain information; directing advisory committee to make certain suggestions; providing composition; directing State Board of Health to adopt certain rules; requiring State Department of Health to maintain a statewide registry; recommending certain students receive certain hearing examination; requiring certain person to forward written report to certain parties; specifying contents of report; allowing school attendance in event of failure of certain parties to furnish certain report; providing for school districts to notify certain parents of certain requirements; directing the State Board of Education to adopt certain rules; directing the State Department of Education to issue certain annual report; providing for codification; and providing an effective date.

BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

SECTION 1. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1210.286 of Title 70, unless there is created a duplication in numbering, reads as follows:

As used in this act:

1. "Audiologist" means a person licensed by the State of Oklahoma to practice audiology under Section 1603 of Title 59 of the Oklahoma Statutes;

2. "Board" means the State Board of Health;

3. "Commissioner" means the State Commissioner of Health;

4. "Comprehensive hearing exam" means a clinical assessment and tests administered by a licensed audiologist to assess a person's level of hearing as well as detect any abnormality or diseases;

5. "Department" means the State Department of Health;

6. "Draining ear" means an ear is not able to be screened due to a pustulant drainage from the ear canal;

7. "Equipment" means the necessary items needed to carry out a hearing screening pursuant to this act and consists of the following:

- a. a properly calibrated pure tone audiometer,
- b. a properly calibrated tympanometer,
- c. an otoacoustic emission device (DPOAE and/or TPOAE),
- d. a tablet computer with audio port; a clinically validated auditory assessment tablet-based software that uses both high-frequency tones and speech screening; high-resolution headphones that provide ambient noise attenuation, or

e. all equipment used for hearing screenings shall meet the specifications of ANSI/ASA 53.6-2018 or the manufacturer's recommendations on an annual basis;

8. "Hearing screening" means the process or system used to identify students who may be at risk of having or developing hearing problems that may adversely affect their ability to acquire knowledge, skill or learning, for the purpose of recommending further evaluation by an audiologist;

9. "A hearing screening app" means a software application that determines relative auditory pathway integrity for speech understanding using speech-in-quiet, speech-in-noise, and tones-in-noise methods, in addition to pure tones at 6000Hz and 8000Hz;

10. "Hard of hearing" (HOH) means having some residual hearing and therefore, not considered deaf;

11. "Hearing screening provider" means a person who has successfully completed hearing screening training using curricula approved by the Department, submitted an application to the Department, and has been approved by the Department as being a hearing screening provider;

12. "Hearing screening registry" means a system for collecting and maintaining in a structured manner the names of individuals that have been approved by the Department as hearing screening providers;

1 13. "Hearing screening trainer" is a person who has been
2 approved as a hearing screening provider approved by the Department
3 to provide training to potential hearing screening providers;

4 14. "Infant and Children's Health Advisory Council" means the
5 advisory council to the Board and Department in the area of infant
6 and child health issues including vision and audiology screening;

7 15. "Middle ear pathology" means the presence of either outer
8 ear obstructions by a foreign object and/or middle ear pressure
9 and/or fluid and/or deformation of middle ear ossicles;

10 16. "Noise-induced hearing loss", referred to as NIHL, means
11 the loss of hearing sensitivity due to excessive exposure at
12 damaging levels of noise;

13 17. "Pure tone" means a hearing screening that determines
14 relative hearing sensitivity for pure tone frequencies; and

15 18. "Referral" means parent or guardian notification that the
16 student's screening results indicate a need for a comprehensive
17 hearing exam by an audiologist.

18 SECTION 2. NEW LAW A new section of law to be codified
19 in the Oklahoma Statutes as Section 1210.287 of Title 70, unless
20 there is created a duplication in numbering, reads as follows:

21 A. 1. The State Department of Health, in coordination with the
22 State Department of Education, shall require hearing screenings of
23 all children in pre-kindergarten, kindergarten, first, second,
24 third, fifth, seventh, and eleventh grades, or children in

1 comparable age groups referred for testing. This includes any child
2 in any grade being recommended for a hearing screening by a parent
3 and/or educator. The timing of screenings shall be followed as set
4 forth in paragraphs 1, 2, and 3 of subsection G in this section.

5 2. Exemption criteria for a school hearing screening is as
6 follows:

- 7 a. a child entering public school or public charter
8 school in this state shall provide certification to
9 school personnel that the student passed a hearing
10 screening meeting the criteria set forth by this act
11 as a minimum, within the previous six (6) months or
12 during the school year. Such screening shall be
13 conducted by personnel listed on the statewide
14 registry as maintained by the State Department of
15 Health, which may include, but not be limited to,
16 Oklahoma-licensed audiologists,
- 17 b. a student enrolled in pre-kindergarten, kindergarten,
18 first, second, third, seventh, and eleventh grade at a
19 public school or public charter school, in this state
20 shall provide, within thirty (30) days of the
21 beginning of the school year, certification to school
22 personnel that the student passed a hearing screening
23 within the previous six (6) months. Such screening
24 shall be conducted by personnel listed on the

1 statewide registry as maintained by the State
2 Department of Health; which may include, but not be
3 limited to, Oklahoma-licensed audiologists, or
4 c. the parent or guardian of a deaf or hard-of-hearing
5 student, who provides within thirty (30) days of the
6 beginning of the school year, certification to school
7 personnel the most recent hearing test by a licensed
8 audiologist which is within the last six (6) months.

9 B. Hearing screenings shall, at a minimum, utilize the
10 equipment and procedures specified under Title 70 of the Oklahoma
11 Statutes and comply with the following criteria based on the
12 methodology used:

13 1. For a pure tone audiometer, perform a four-frequency, pure
14 tone hearing screening on each of the student's ears with response
15 recorded at each of the following frequencies and intensities:

- 16 a. 1000 Hz at 20 dB HL,
- 17 b. 2000 Hz at 20 dB HL,
- 18 c. 4000 Hz at 20 dB HL, and
- 19 d. 6000 Hz at 20 dB HL;

20 2. For a combination of a tympanometer and a pure tone
21 audiometer:

- 22 a. produce a tympanogram showing the probability of
23 middle ear fluid by using a tympanometer and/or any
24 new middle ear screening tool determined by the

1 Department to be a comparable screening tool.

2 Tympanometry shall be performed by an audiologist,
3 physician, or another advanced practice provider (APP)
4 who is licensed to interpret diagnostic testing. A
5 tympanometer will show the following results:

6 (1) peak acoustic immittance in mmho, ml, or
7 compliance for a 226 Hz probe tone, or

8 (2) tympanometric width in daPa, and

9 b. obtain the results of a four-frequency, pure tone
10 hearing screening on each of the student's ears with
11 response recorded at each of the following frequencies
12 and intensities:

13 (1) 1000 Hz at 20 dB HL,

14 (2) 2000 Hz at 20 dB HL,

15 (3) 4000 Hz at 20 dB HL, and

16 (4) 6000 Hz at 20dB; or

17 3. For an otoacoustic emissions device (OAE) device:

18 a. measure responses of the cochlea to no less than four
19 test frequencies, and

20 b. device display screen indicates pass for all four
21 frequencies;

22 All equipment shall meet the American National Standards
23 Institute (ANSI) standards and manufacturer specifications. This
24 equipment shall be calibrated annually and shall meet the

1 specifications of ANSI/ASA 53.6-2018 or the manufacturer's
2 recommendations to ensure accuracy and validity. The equipment
3 model and calibration date must be on all screening forms.

4 Schools opting to use speech screenings must use a tablet
5 meeting the same ANSI standards as an audiometer and an evidence-
6 based, clinically validated assessment software using pure tones and
7 speech software, or any new hearing screening tool determined by the
8 Department to be a comparable screening tool that utilizes both
9 methods.

10 C. The following hearing acuity criteria shall be used as a
11 basis for referring a child for further evaluation by an
12 audiologist:

13 1. Refer on a clinically validated tablet-based auditory
14 assessment software using both high-frequency pure tones and speech
15 testing for two screenings and/or referring the pure tone
16 frequencies at any frequency in one or both ears;

17 2. A draining ear; or

18 3. A refer on OAEs in one or both ears at any frequency.

19 D. Training for performing hearing screenings in schools shall
20 be provided by the Department and at a minimum, include how to
21 perform a hearing screening, criteria for passing, the various
22 methods to screen hearing, and resources to use when a child is
23 referred twice. Those screeners who opt to use tympanometry shall
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1 be an audiologist, physician, or another advanced practice provider
2 (APP) who is licensed to interpret diagnostic testing.

3 E. The statewide registry will maintain a list of individuals
4 who have been trained to screen hearing using all methods. This
5 training is good for three (3) years. The registry will also
6 maintain a list of pediatric audiologists who can provide services
7 to schools who need further testing for referred students.

8 F. Licensed audiologists are exempt from training but will be
9 included on the statewide registry and referral list at their
10 request.

11 G. This section shall recognize the need to use a gradient
12 method to allow schools to learn, adapt, and implement hearing
13 screenings in the schools over a three-year period, unless a
14 district chooses a more rapid implementation. The gradient method
15 and timeline is listed as follows:

16 1. First year hearing screenings for children shall begin in
17 2026 and may include any of the methods listed therein. Any child
18 being evaluated for special education services, and/or is referred
19 by a parent/educator, shall be screened using speech screening
20 protocol and high-frequency pure tones;

21 2. The second year hearing screenings for children shall begin
22 in 2027 and may include any of the methods listed therein with the
23 exception of special education students. Any child who is being
24 evaluated/reevaluated for special education services and/or is

1 referred by a parent/educator shall be screened using speech and
2 high-frequency pure tones; and

3 3. The third year hearing screenings for all children shall
4 begin in 2028 being evaluated for or are in special education
5 services, and/or is referred by a parent/educator shall use speech
6 and high-frequency pure tones.

7 H. 1. The Department shall make recommendations on:

8 a. qualifications for initial recognition and renewal of
9 recognition of hearing screeners, and

10 b. qualifications for initial recognition and renewal of
11 recognition of hearing screener trainers; provided,
12 Oklahoma licensed audiologists shall be exempt from
13 any training requirements.

14 2. The Department shall:

15 a. establish and thereafter maintain a statewide
16 registry, available via the Internet, which shall
17 contain a list of approved hearing screeners and
18 audiologists who seek to be listed to provide
19 services, and

20 b. maintain a list of approved hearing screener trainers.

21 3. After notice and hearing, the Department may deny, refuse,
22 suspend, or revoke approval to an applicant who has a history of:
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- a. noncompliance or incomplete or partial compliance with the provisions of this section or the rules adopted by the Board to implement the provisions of this section,
- b. referring persons to a business in which the applicant has a financial interest or a business which is owned or operated by someone within the third degree of consanguinity or affinity of the applicant, or
- c. conduct which demonstrates that the applicant is providing services in a manner which does not warrant public trust.

4. The Board, giving consideration to the recommendations of the Council, shall promulgate rules to implement the provisions of this section.

I. 1. The parent or guardian of each student who fails the hearing screening required in subsection A of this section shall receive a recommendation to undergo a comprehensive hearing examination performed by an Oklahoma-licensed audiologist.

2. The Oklahoma-licensed audiologist shall forward a written report of the results of the comprehensive hearing examination to the Department, the student's school, parent or guardian, and primary health care provider designated by the parent or guardian. The report shall include, but not be limited to:

- a. date of report,
- b. date of equipment calibration,

- c. name, address, and date of birth of the student,
- d. name of the student's school,
- e. type of examination,
- f. a summary of significant findings, including
diagnoses, treatment, prognosis, whether or not a
return visit is recommended and, if so, when,
- g. recommended educational adjustments for the child, if
any, which may include: preferential seating in the
classroom, the use of amplification, specific
interventions, FM systems, and any other
recommendations, and
- h. name, address, credentials, and signature of the
examiner.

J. No student shall be prohibited from attending school for a parent's or guardian's failure to furnish a report of the student's hearing screening or an examiner's failure to furnish the results of a student's comprehensive hearing examination required by this section.

K. School districts shall notify parents or guardians of students who enroll in kindergarten, first, second, third, seventh, and eleventh grade for the 2026-2027 school year and each year thereafter of the requirements of this section.

L. The State Board of Education shall adopt rules for the implementation of this act except as provided in subsection B of

1 this section. The State Department of Education shall issue a
2 report annually that provides:

3 1. The number and grade level of students screened;

4 2. The number and grade level of students that were referred
5 for additional, more comprehensive screenings after initial
6 screening, as well as their reading proficiency levels;

7 3. For the students who were referred for more comprehensive
8 screening, the actions that were taken to better equip these
9 students for academic success; and

10 4. Any other quantitative or qualitative data and information
11 the Department deems appropriate to include so as to identify trends
12 and opportunities for improvement.

13 SECTION 3. This act shall become effective June 1, 2026.

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