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REGULATIONS COMPILER

1 CABINET FOR HEALTH AND FAMILY SERVICES

2 Department for Public Health

3 Office for Children with Special Health Care Needs

4 (Amendment)

5 911 KAR 1:085. Early Hearing Detection and Intervention Program.

6 RELATES TO: KRS 13B.050, 15.111(2)(g), 194A.030(5), 200.460

7 200.499, 211.645, 211.647, 213.046(16), 216.2970, 334A.020(5)

8 STATUTORY AUTHORITY: KRS 194A.030(5), 194A.050(1), 211.647(3),

9 216.2970(1)

10 NECESSITY, FUNCTION, AND CONFORMITY: KRS 194A.050(1) requires

11 The secretary of the Cabinet for Health and Family Services to promulgate administrative

12 regulations necessary to operate the programs and fulfill the responsibilities vested in the

13 cabinet, to implement programs mandated by federal law, or to qualify for federal funds.

14 KRS 194A.030 authorizes the Office for Children with Special Health Care Needs

15 (OCSHCN) to promulgate administrative regulations as may be necessary to implement

16 and administer its responsibilities under KRS 200.460 to 200.490. KRS 211.647(3)

17 authorizes OCSHCN to promulgate administrative regulations establishing standards for

18 infant audiological assessments and diagnostics centers. KRS 216.2970(1) requires the

19 OCSHCN to promulgate administrative regulations establishing approved methods for

20 auditory screening for all infants born in hospitals offering obstetric services and

21 alternative birthing centers with at least forty (40) births per year. This administrative

1 regulation establishes standards, eligibility criteria, application processes, reporting  
2 requirements, and appeal rights for entities seeking designation as approved infant  
3 audiological assessment and diagnostic centers, and identifies  
4 approved methods for auditory screening for newborn infants in hospitals and alternative  
5 birthing centers.

6 Section 1. Definitions. (1) "AAA Guidelines" means the "Clinical Guidance  
7 Document Assessment of Hearing in Infants and Young Children" published by the  
8 American Academy of Audiology.

9 (2) "ASHA Guidelines" means the "Guidelines for the  
10 Audiologic Assessment of Children from Birth to 5 Years of Age" published by the  
11 American Speech-Language-Hearing Association.

12 (3) "Audiologist" is defined by KRS 334A.020(5).

13 (4) "Audiology extern" means a student engaged in the clinical experience  
14 component of an audiology doctoral degree program.

15 (5) "Auditory brainstem response" or "ABR" means an objective  
16 electrophysiologic measurement of the brainstem's response to the ear when stimulated  
17 with a click sound or tone burst.

18 (6) "Automated auditory brainstem response" or "AABR" means an automatic  
19 ABR resulting in a pass/refer outcome.

20 (7) "JCIH Guidelines" means "Year 2019 Position Statement: Principles and  
21 Guidelines for Early Hearing Detection and Intervention Programs" published by the  
22 Joint Committee on Infant Hearing.

23 (8) "Office" or "OCSHCN" is defined by KRS 211.645(2).

1 (9) "Otoacoustic emissions" means an objective physiological test method for  
2 measuring responses elicited directly from the cochlea.

3 Section 2. Eligibility Criteria for Centers. (1) In order to be eligible for  
4 designation as a Level 1 infant audiological assessment and diagnostic center, an entity  
5 located in Kentucky shall:

6 (a) Employ at least one (1) audiologist who:

- 7 1. Is currently licensed pursuant to KRS Chapter 334A;  
8 2. Has experience testing children in the age range newborn to three (3) years; and  
9 3. a. Performs all evaluations; or

10 b. Directly supervises audiology externs performing evaluations;

11 (b) Possesses [~~Possesses~~] the capacity to complete the following tests:

- 12 1. Otoscopic examination;  
13 2. Tympanometry;  
14 3. Ipsilateral acoustic reflex measurement;  
15 4. Contralateral acoustic reflex measurement;  
16 5. Ear-specific behavioral observation audiometry;  
17 6. Speech awareness threshold;  
18 7. Speech recognition or reception threshold;  
19 8. Play audiometry; and  
20 9. Either:

21 a. Otoacoustic emissions with diagnostic or screening capabilities; or

22 b. ABR screening;

23 (c) Annually calibrate all measuring and testing equipment; and

1 (d) Submit a complete application and assurance packet in accordance with  
2 Section 3 of this administrative regulation.

3 (2) In order to be eligible for designation as a Level 2 infant audiological  
4 Assessment and diagnostic center, an entity located in Kentucky shall:

5 (a) Meet the requirements specified in subsection (1) of this section; and

6 (b) Possess the capacity to complete:

7 1. Otoacoustic emissions with diagnostic or screening capabilities;

8 2. Frequency-specific ABR;

9 3. Bone conduction ABR; and

10 4. Real ear measures.

11 Section 3. Application Process. (1) An entity seeking designation as an infant  
12 audiological assessment and diagnostic center shall submit to OCSHCN a completed  
13 application packet containing:

14 (a) Completed and signed form OCSHCN-E106, Potential Infant Audiological  
15 Assessment and Diagnostic Center Questionnaire;

16 (b) Copies of current professional licenses for audiologists performing  
17 evaluations;

18 (c) Copies of current calibration certificates for audiological testing equipment;

19 and

20 (d) Copies of policies and procedures for tests and measures requested on the  
21 OCSHCN E106, Potential Infant Audiological Assessment and Diagnostic Center  
22 Questionnaire.

23 (2) OCSHCN shall review an entity's application within thirty (30) calendar days

1 Of receiving a complete packet submitted in accordance with subsection (1) of this  
2 Section.

3 (3) Upon review of an entity's application packet, OCSHCN's executive director  
4 or designee shall approve the entity as a Level 1 Infant Audiological Assessment and  
5 Diagnostic Center if:

6 (a) The entity meets the requirements specified in Section 2(1) of this  
7 administrative regulation; and

8 (b) OCSHCN determines that the entity's policies and procedures conform best to  
9 practice standards as described in JCIH Guidelines and:

10 1. AAA Guidelines; or

11 2. ASHA Guidelines.

12 (4) Upon review of an entity's application packet, OCSHCN's executive director  
13 or designee shall approve the entity as a Level 2 Infant Audiological Assessment and  
14 Diagnostic Center if:

15 (a) The entity meets the requirements specified in Section 2(2) of this  
16 Administrative regulation; and

17 (b) OCSHCN determines that the entity's policies and procedures conform to best  
18 practice standards as described in JCIH Guidelines and:

19 1. AAA Guidelines; or

20 2. ASHA Guidelines.

21 (5) If OCSHCN's executive director or designee determines that the entity does  
22 not meet the requirements specified in Section 2 of this administrative regulation,  
23 OCSHCN shall:

1 (a) Advise the entity and request clarifying information; or  
2 (b) Deny the designation as an Infant Audiological Assessment and Diagnostic  
3 Center and notify the entity of appeal rights pursuant to Section 8 of this administrative  
4 Regulation.

5 (6) Approvals shall expire on December 31 of odd-numbered years. All entities  
6 Seeking continued approval shall re-apply by December 1 of that year in accordance with  
7 this section.

8 Section 4. Publication of Approved List.

9 (1) In accordance with KRS 211.647, OCSHCN shall maintain a current listing of  
10 All approved Infant Audiological Assessment and Diagnostic Centers, with contact  
11 information.

12 (2) OCSHCN shall make the listing public through the following methods:

13 (a) Posting on its agency Web site,

14 <https://chfs.ky.gov/agencies/ocshcn> [~~<http://chfs.ky.gov/agencies/ocshcn>~~];

15 (b) Providing to the Cabinet for Health and Family Services, Office of  
16 Administrative and Technology Services, for inclusion on the KY-CHILD electronic  
17 information system used by birthing hospitals and centers;

18 (c) Enclosing as an attachment to correspondence with parents; and

19 (d) Mailing a listing to birthing hospitals and centers upon request.

20 Section 5. Removal from Approved List and Updates Required. (1) OCSHCN  
21 shall remove an entity from the approved list and notify the entity of the removal if the  
22 entity requests removal.

23 (2) If OCSHCN receives a complaint that an entity no longer meets the

1 requirements of Section 2 of this administrative regulation, OCSHCN shall:

2 (a) Advise the entity of the complaint;

3 (b) Request clarifying information from the entity;

4 (c) Review any information received; and

5 (d) Determine whether the entity meets the eligibility requirements of Section 2  
6 this administrative regulation.

7 (3) If OCSHCN determines that the entity no longer meets the eligibility  
8 requirements, the office shall:

9 (a) Notify the entity of appeal rights pursuant to Section 8 of this administrative  
10 regulation; and

11 (b) Remove the entity from the approved list.

12 (4) Following approval, an Infant Audiological Assessment and Diagnostic Center  
13 shall provide documentation via form OCSHCN-E107, Infant Audiological Assessment  
14 and Diagnostic Center Program Modification, if the changes in circumstances occur:

15 (a) Employment or termination of employment of an audiologist;

16 (b) Change in licensure status of an audiologist;

17 (c) Relocation of agency, name change, or addition of a location; or

18 (d) Modification to policy or procedure with regard to evaluations described in  
19 Section 2 of this administrative regulation.

20 Section 6. Reporting Requirements.

21 (1) Upon completion of diagnostic testing of an infant or child aged birth to three

22 (3) years described in KRS 211.647(5), an approved Infant Audiological Assessment and

23 Diagnostic Center shall report to OCSHCN via form OCSHCN-E3:

- 1 (a) Identifying and demographic information;
- 2 (b) Results of the follow-up audiological evaluation; and
- 3 (c) Documentation of the referral required by KRS 211. 647(5).
- 4 (2) An approved Infant Audiological Assessment and Diagnostic Center shall
- 5 submit information specified in subsection (1) of this section electronically via the KY
- 6 CHILD electronic information system for permanent hearing loss, within forty-eight (48)
- 7 hours of evaluation, in accordance with KRS 211. 647, via form OCSHCN-E3.
- 8 (3) Scheduled appointments which are not kept by families shall be marked in the
- 9 KYCHILD electronic information system as no-show within four (4) calendar days if not
- 10 rescheduled.

11 Section 7. Resource and Informational Materials. OCSHCN shall make available

12 to families of all newborns and children ages birth to three (3) years identified as having

13 permanent hearing loss information provided by the Kentucky Commission on the

14 Deaf and Hard of Hearing.

15 Section 8. Appeal Rights.

16 An entity denied designation as an Infant Audiological Assessment and Diagnostic Center

17 or which has been removed from the approval list may request an administrative hearing

18 from the Office of Administrative Hearings within the Department of Law in accordance

19 with KRS 15.111(2)(g) and KRS 13B [in accordance with 911 KAR 1:090].

20 Section 9. Approved Methods of Auditory Screening for Newborn Infants and

21 Children Ages Birth to Three (3) Years.

22 (1) Auditory screenings pursuant to KRS 216.2970(1) shall include at least one

23 (1) of the following physiological tests:

1 (a) AABR; or  
2 (b) Otoacoustic emissions.  
3 (2) Auditory screening reports shall:  
4 (a) Document the results of physiological tests conducted;  
5 (b) Document the presence of any risk factors pursuant to KRS 211.645(5); and  
6 (c) Be submitted via the KY-CHILD electronic information system  
7 Section 10. Incorporation by Reference.  
8 (1) The following material is incorporated by reference:  
9 (a) "Clinical Guidance Document Assessment of Hearing in Infants and Young  
10 Children", 1/2020;  
11 (b) "OCSHCN-E106, Potential Infant Audiological Assessment and Diagnostic  
12 Center Questionnaire", 03/2025[~~6/2022~~];  
13 (c) "OCSHCN-E107, Infant Audiological Assessment and Diagnostic Center  
14 Program Modification",03/2025 [~~6/2022~~];  
15 (d) "Guidelines for the Audiologic Assessment of Children From Birth to 5 Years  
16 of Age" 2004 American Speech-Language-Hearing Association;  
17 (e) "Year 2019 Position Statement: Principles and Guidelines for Early Hearing  
18 Detection and Intervention Programs" Joint Committee on Infant Hearing; and  
19 (f) "OCSHCN-E3 Audiology Update Form (AUF) Worksheet", 03/2025[~~6/2022~~].  
20 (2) This material may be inspected, copied, or obtained, subject to applicable copyright  
21 law, at the Office for Children with Special Health Care Needs, 310 Whittington  
22 Parkway, Suite 200, Louisville, Kentucky 40222, Monday through Friday, 8 a.m. to 4:30  
23 p.m. or online at the agency's Web site at <https://chfs.ky.gov/agencies/ocshcn>

1 [\[https://chfs.ky.gov/agencies/ceshen\]](https://chfs.ky.gov/agencies/ceshen).

2 (3) (a) The material in paragraph (a) is available online at

3 <https://www.audiology.org/practice-guideline/clinical-guidance-document-assessment-of>  
4 [hearing-in-infants-and-young-children.](https://www.audiology.org/practice-guideline/clinical-guidance-document-assessment-of)

5 (b) The materials in paragraph (b), (c), (d), (e), and (f) is available online at the  
6 agency's website at <https://www.chfs.ky.gov/agencies/ocshcn/Pages/Incorporated.aspx>

907 KAR 1:085

REVIEWED:

9/15/2025

Date

Signed by:

*John Langefeld*

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John R. Langefeld, MD  
Commissioner, Department for Public Health

APPROVED:

9/16/2025

Date

Signed by:

*Steven Stack*

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Steven J. Stack, MD, MBA., Secretary  
Cabinet for Health and Family Services

**PUBLIC HEARING AND PUBLIC COMMENT PERIOD:**

A public hearing on this administrative regulation shall, if requested, be held on April 27, 2026 at 9:00 a.m. using the CHFS Office of Legislative and Regulatory Affairs Zoom meeting room. The Zoom invitation will be emailed to each requestor the week prior to the scheduled hearing. Individuals interested in attending this virtual hearing shall notify this agency in writing by April 20, 2026, five (5) workdays prior to the hearing, of their intent to attend. If no notification of intent to attend the hearing is received by that date, the hearing may be canceled. This hearing is open to the public. Any person who attends virtually will be given an opportunity to comment on the proposed administrative regulation. A transcript of the public hearing will not be made unless a written request for a transcript is made. If you do not wish to be heard at the public hearing, you may submit written comments on this proposed administrative regulation through April 30, 2026. Send written notification of intent to attend the public hearing or written comments on the proposed administrative regulation to the contact person. Pursuant to KRS 13A.280(8), copies of the statement of consideration and, if applicable, the amended after comments version of the administrative regulation shall be made available upon request.

**CONTACT PERSON:** Krista Quarles, Policy Analyst, Office of Legislative and Regulatory Affairs, 275 East Main Street 5 W-A, Frankfort, KY 40621; Phone: 502-564-7476; Fax: 502-564-7091; CHFSregs@ky.gov.

## REGULATORY IMPACT ANALYSIS AND TIERING STATEMENT

911 KAR 1:085: Early Hearing Detection and Intervention Program

Agency Contact: Emily Allen

Phone Number: 502-564-3568

Email: Emily.allen@ky.gov

Contact Person: Krista Quarles

Phone Number: (502) 564-7476

Email: CHFSregs@ky.gov

Subject Headings: Administrative Hearings, Audiology, Deaf and Hard of Hearing,

(1) Provide a brief summary of:

(a) What this administrative regulation does:

This administrative regulation assists in providing guidance that follow the Early Hearing Detection and Intervention Act and state authority.

(b) The necessity of this administrative regulation:

This amended regulation is necessary to ensure that agencies receiving Early Hearing Detection and Intervention Act funding are adhering to the same guidance and identification process for infant hearing loss.

(c) How this administrative regulation conforms to the content of the authorizing statutes:

This administrative regulation amendment uses the authorized statutes as a base to build the guidance provided in this regulation. This amended regulation allows Kentucky to provide more up-to-date forms for clarity, the removal of reference to a repealed administrative regulation 911 KAR 1:090. In addition, this regulation updates the referenced OCSHCN website.

(d) How this administrative regulation currently assists or will assist in the effective administration of the statutes:

This amended regulation removes reference to 911 KAR 1:090 as this regulation is being repealed and the reference in this administrative regulation is no longer necessary. In addition, there will be updates to necessary forms in order to provide clarity in application when applying to become an audiological diagnostic center.

(2) If this is an amendment to an existing administrative regulation, provide a brief summary of:

(a) How the amendment will change this existing administrative regulation: The amendment to this administrative regulation updates the process in which to file an appeal to the Early Hearing Detection and Intervention program as well as, updating necessary forms changing First Steps to Kentucky Early Intervention System (KEIS)

(b) The necessity of the amendment to this administrative regulation: The amendment to this administrative regulation is necessary to clarify the process of appeal for the Early Hearing Detection and Intervention Services.

(c) How the amendment conforms to the content of the authorizing statutes: This amendment conforms to the content of the authorizing statute to ensure there is a policy in place in the instance that an appeal is deemed necessary.

(d) How the amendment will assist in the effective administration of the statutes: The amendment of the administrative regulation will assist with effective administration of the statute outlining the appeal process.

(3) Does this administrative regulation or amendment implement legislation from the previous five years? Yes, 2023, Senate Bill 48

(4) List the type and number of individuals, businesses, organizations, or state and local governments affected by this administrative regulation: Kentucky Office for Children with Special Health Care Needs; Children with special health care needs and their families; and 12 Kentucky assessment and diagnostic audiological centers.

(5) Provide an analysis of how the entities identified in question (4) will be impacted by either the implementation of this administrative regulation, if new, or by the change, if it is an amendment, including: The proposed amendments are suggested based on needs of the above agencies. The proposed amendments will impact the above agencies in a positive way in updating the reference materials, and to make the regulation consistent with the statute.

(a) List the actions that each of the regulated entities identified in question (4) will have to take to comply with this administrative regulation or amendment:

The agencies above will need to ensure they meet the specified expectations in the updated reference materials. These amendments are to update practice reference materials that take into account newer procedural standards.

(b) In complying with this administrative regulation or amendment, how much will it cost each of the entities identified in question (4): The proposed amended regulation will cost the agencies a minimal amount if not an actual reduction in costs.

(c) As a result of compliance, what benefits will accrue to the entities identified in question (4): This amended regulation should result in more updated practice references for providers.

(6) Provide an estimate of how much it will cost the administrative body to implement this administrative regulation:

(a) Initially: There will be no cost to the cabinet to implement this administrative regulation.

(b) On a continuing basis: There will be no cost to the cabinet to implement this administrative regulation.

(7) What is the source of the funding to be used for the implementation and enforcement of this administrative regulation or this amendment: Early Hearing Detection and Intervention Act funding, and state funds.

(8) Provide an assessment of whether an increase in fees or funding will be necessary to implement this administrative regulation, if new, or by the change if it is an amendment: Not applicable

(9) State whether or not this administrative regulation establishes any fees or directly or indirectly increases any fees: There are not fees associated with this administrative regulation.

(10) TIERING: Is tiering applied?

There is no tiering for this program as there are no fees related to this program or regulation

## FISCAL IMPACT STATEMENT

911 KAR 085: Early Hearing Detection and Intervention Program

Contact Person: Emily Allen

Phone: 502-564-3568

Email: Emily.allen@ky.gov

Contact Person: Krista Quarles

Phone Number: (502) 564-7476

Email: CHFSregs@ky.gov

(1) Identify each state statute, federal statute, or federal regulation that requires or authorizes the action taken by the administrative regulation.  
42 USC 280g-1, KRS 194A.030(5), 194A.050(1), 211.647(3), 216.2970(1), 7.136(2)

(2) Identify the promulgating agency and any other affected state units, parts, or divisions:  
The Office for Children with Special Health Care Needs and the Early Detection and Intervention Services within the Cabinet for Health and Family Services.

(a) Estimate the following for the first year:

Expenditures: This administrative regulation will not impact expenditures for the Office for Children with Special Health Care Needs

Revenues: This administrative regulation will not impact revenues for the Office for Children with Special Health Care Needs

Cost Savings: This administrative regulation will not impact on cost saving for the Office for Children with Special Health Care Needs

(b) How will expenditures, revenues, or cost savings differ in subsequent years? There will be no change in expenditures, revenues, or cost savings in subsequent years.

(3) Identify affected local entities (for example: cities, counties, fire departments, school districts): There are no affected local entities.

(a) Estimate the following for the first year:

Expenditures: Not applicable

Revenues: Not applicable

Cost Savings: Not applicable

(b) How will expenditures, revenues, or cost savings differ in subsequent years? Not applicable

(4) Identify additional regulated entities not listed in questions (2) or (3): Kentucky assessment and diagnostic audiological centers.

(a) Estimate the following for the first year:

Expenditures: Not applicable

Revenues: Not applicable

Cost Savings: Not applicable

(b) How will expenditures, revenues, or cost savings differ in subsequent years? There will be no change in subsequent years.

(5) Provide a narrative to explain the: The programs outlined in the administrative regulation are already in existence and there will be no additional fiscal impact on the proposed amendments.

(a) Fiscal impact of this administrative regulation: This administrative regulation will not have a fiscal impact.

(b) Methodology and resources used to determine the fiscal impact: The programs outlined in the administrative regulation are already in existence and there will be no additional fiscal impact on the proposed amendments.

(6) Explain:

(a) Whether this administrative regulation will have an overall negative or adverse major economic impact to the entities identified in questions (2) - (4). (\$500,000 or more, in aggregate) This administrative regulation does not have a major economic impact.

(b) The methodology and resources used to reach this conclusion: The programs outlined in the administrative regulation are already in existence and there will be no additional fiscal impact on the proposed amendments.

COMMONWEALTH OF KENTUCKY  
CABINET FOR HEALTH AND FAMILY SERVICES  
OFFICE FOR CHILDREN WITH SPECIAL HEALTH CARE NEEDS  
911 KAR 1:085  
Summary of Material Incorporated by Reference

1. "OCSHCN-E106, Potential Infant Audiological Assessment and Diagnostic Center Questionnaire", 03/2025. This form is used to gather information from an entity applying to become an audiological assessment and diagnostic center. The form updates remove the reference to First Steps and replaces it with Kentucky Early Intervention Services. This form contains three (3) pages.
2. "OCSHCN-E107, Infant Audiological Assessment and Diagnostic Center Program Modification", 03/2025. This form is used to gather information from an entity which has made changes to its center. The change to this form specifies that licenses for audiologist shall be included with the form. This form contains one (1) page.
3. "OCSHCN-E3, Audiological Update Form", 03/2025. This form is used by the audiological and diagnostic centers to inform the Office of an infant's permanent hearing loss. The changes in the form include changing language from "referred" to "failed" in reference to a hearing screening and adds specialty providers to the referral list. This form contains four (4) pages.

A total of eight (8) new pages are incorporated by reference into this administrative regulation.