



# KIDSNET UPDATE

RHODE ISLAND'S INTEGRATED CHILD HEALTH INFORMATION SYSTEM

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### CENTER FOR HEALTH DATA AND ANALYSIS (CHDA)

Sam Viner-Brown  
Chief

Kristen St. John  
Acting KIDSNET Manager  
Kristen.StJohn@health.ri.gov  
401-222-5123

Jeff Goggin  
KIDSNET/RICAIR Development Manager  
jeff.goggin@health.ri.gov  
401-222-4968

Danielle Woods  
Immunization Interface Manager  
Danielle.Woods@health.ri.gov

### PROVIDER RELATIONS

Janet Limoges  
Provider Relations Manager  
janet.limoges@health.ri.gov  
401-222-7681

Carla Laroche-Harris  
Provider Relations Liaison  
carla.larocheharris@health.ri.gov  
401-222-4644

Alyson Duhaime  
RICAIR Provider Relations Liaison  
Alyson.Duhaime@health.ri.gov

### PROGRAMMER

Jeannine Warrener

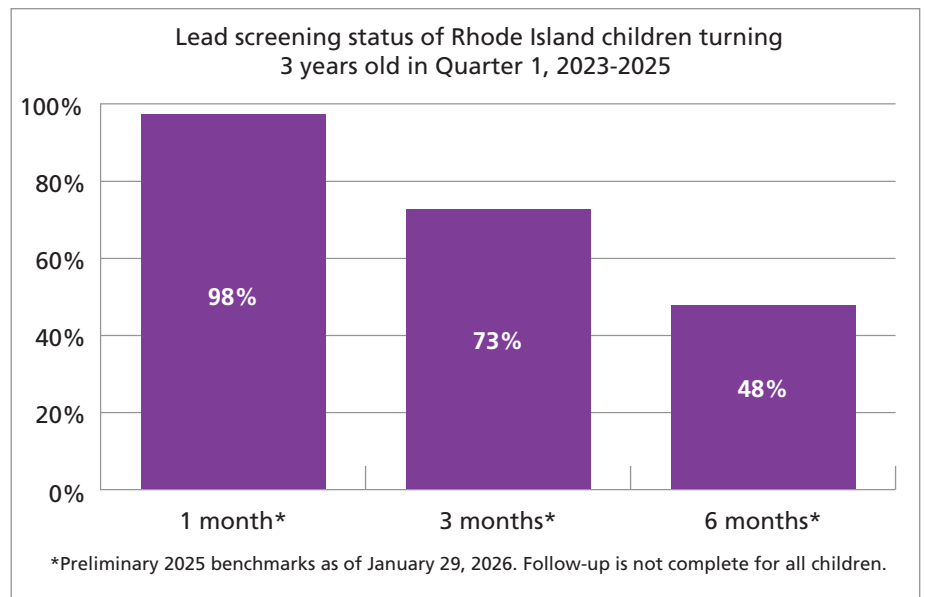
### DATA MANAGEMENT/DATA QUALITY

Joel Balkum	Catherine Taddei
Amanda Giblin	Ashley Devolve
Christine Jason	AJ Lizarda
Richard Lupino	Frankie Dalton

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### Rhode Island Early Hearing Detection and Intervention Program's Progress Toward 1-3-6 Benchmarks

According to national guidelines, babies should have an initial hearing screen by 1 month of age, a hearing loss diagnosis by 3 months, and enroll in early intervention by 6 months. Rhode Island's Early Hearing Loss and Detection (EHDI) Program uses these 1-3-6 benchmarks to ensure hearing loss is identified early and appropriate interventions are received. Of the 10,314 babies born in Rhode Island in 2025, 98% received a hearing screening by 1 month. By 3 months, 73% of infants who did not pass their screen received a hearing loss diagnosis. By 6 months, 48% of infants with a hearing loss diagnosis enrolled in early intervention. Common reasons for not receiving a diagnosis by 3 months included lost to follow up from outpatient screening or audiology, diagnosis scheduled after 3 months, and diagnosis was received after 3 months due to prematurity. The EHDI program will continue to monitor these benchmarks and work with providers to ensure babies receive a hearing screening and are diagnosed with hearing loss as early as possible. You can run the KIDSNET Newborn Hearing Screening Follow-up report to identify babies that need follow-up, including those that passed the newborn hearing screening but have risk factors for late onset hearing loss. You may be able to encourage families to complete the diagnostic audiology process and assist them with any barriers they might be experiencing.



Center for Health Data and Analysis (CHDA)  
Division of Data Analytics, Vital Records, and Health Systems Policy  
Rhode Island Department of Health (RIDOH)  
Three Capitol Hill, Providence, RI 02908  
Website: [www.health.ri.gov](http://www.health.ri.gov) – [www.facebook.com/HealthRI](https://www.facebook.com/HealthRI) - @RIHEALTH

## Birth Defects Reporting

Since 2005, all healthcare professionals are required to report birth defects identified among children, up to age five, to RIDOH. This helps the Rhode Island Birth Defects Program (RIBDP) ensure that children receive appropriate services in a timely manner. Pediatric providers can report birth defects electronically through the Birth Defects Reporting module in KIDSNET. To do so, click on the birth defects reporting link in the KIDSNET left-hand menu and enter the required information. Birth defects previously reported to RIBDP will be displayed and do not need to be reported again. RIBDP thanks Hasbro Children's Hospital's Pediatric Heart Center, participating audiologists, and other healthcare professionals who continue to report birth defects through KIDSNET. If you would like further training on how to report birth defects through KIDSNET, please contact your Provider Relations Representative.



## Immunization Schedule

On January 5, the Centers for Disease Control and Prevention (CDC) reduced the number of vaccines routinely recommended for all children from 17 to 11. Medical evidence supporting vaccination for these 17 vaccines remains unchanged. RIDOH's Office of Immunization recommends that healthcare professionals follow [Rhode Island's Recommended Childhood Immunization Schedule for Routine Vaccination Using State-Supplied Vaccine](#). This schedule aligns with the [American Academy of Pediatrics' \(AAP\) Recommended Child and Adolescent Immunization Schedule](#). RIDOH's Office of Immunization will continue to provide all recommended childhood immunizations through the State-Supplied Vaccine (SSV) Program and insurance will continue to cover vaccine administration fees. Preschool, childcare, and school entry requirements remain unchanged.

## January 31 Marks End of Administrative Season for Maternal RSV Vaccination

The administrative period for Abrysvo, the RSV maternal vaccine, ended on January 31, 2026. Registered State-Supplied Vaccine (SSV) providers can administer the vaccine to pregnant people 32-36 weeks of gestation through January 31 to prevent RSV-associated lower respiratory tract infection in infants. [Read the complete advisory to SSV providers.](#)

## Importance of Hepatitis B Vaccine Birth Dose and Pediatric Hepatitis B Vaccination

[RIDOH continues to recommend](#) all newborns receive a hepatitis B vaccine birth dose within 24 hours of delivery, regardless of the hepatitis B infection status of the birth parent, and that all children complete the full vaccination series within 18 months. These recommendations align with the [American Academy of Pediatrics' Recommended Child and Adolescent Immunization Schedule](#) and the [Northeast Public Health Collaborative](#).

Learn more at [ri.gov/press/view/50130](https://ri.gov/press/view/50130)

## Family Visiting

Does your practice see pregnant people or families with young children?

If you work with pregnant people or families with young children, please consider referring families to RIDOH's Family Visiting program. The Family Visiting program offers three different programs to families- First Connections, Healthy Families America, and Parents as Teachers. OBGYNs, pediatric practices, and health centers are encouraged to refer expectant parents and families with young children who may benefit from additional support. All Family Visiting programs are free to families, and there are options for every Rhode Island-based expectant parent and/or family with young children. The programs focus on what each family needs, including support around safe sleep practices and connections to resources, including childcare, health insurance, or WIC. All programs work with families affected by Substance Use Disorder.

Family Visiting supports are provided in a family's home or wherever the family is comfortable having a visit. Family Visitors answer questions about pregnancy and parenting, provide developmentally appropriate activities for children and help families maintain connections to their medical home. To assist providers in knowing which families may benefit the most from Family Visiting, the Newborn Characteristics Report is available in KIDSNET. By looking at factors that may impact a family's health outcomes, this report identifies newborns and their caregivers that may benefit from Family Visiting. However, any family may be referred.

For more information about Family Visiting programs, please visit [www.health.ri.gov/familyvisiting](http://www.health.ri.gov/familyvisiting). A referral form is available on the website. Fax referrals to 401-222-5688 or call 401-222-5960 and ask for Family Visiting. To request an overview of family visiting for your practice or agency, please call 401-222-5946.

