

October 10, 2023
Daniel Rosenthal, PE (Chair)
Hearing Care Professionals Technical Review Committee
Nebraska Department of Health & Human Services
Attn: Ron Briel, Credentialing Review
PO Box 94986
Lincoln, NE 68509-4986
Sent via e-mail

POSITION: STRONGLY OPPOSE

Dear Mr. Rosenthal,

I am writing in strong opposition to the proposal to expand the scope of practice of Hearing Instrument Specialists (HIS). I am a licensed clinical audiologist and practice in Norfolk, Nebraska. I hold a Doctorate of Audiology from AT Still University, and a Master of Science in Audiology and a Bachelor of Arts in Audiology and Speech Pathology from the University of Nebraska-Lincoln. In addition, I have extensively studied tinnitus and auditory processing testing and treatment.

The proposed expansion would allow HIS to perform diagnostic services and additional treatments without formal education. Audiologists have extensive education, directly supervised clinical experience, and proof of competency and proficiency to perform these services and treatments. How will you prove HIS are competent in these services without formal education, demonstration of clinical experience, and examination? It is often difficult for the public to understand the differences between the scope of practice of an Audiologist versus that of HIS. How do you plan to educate the public on the difference in education and clinical experience required by an audiologist versus an HIS? How will you protect patients from poor care because of this potential expansion of scope without proper training? Tinnitus, for example, is studied by Audiologists for years requiring a firm foundation of anatomy and physiology of the ear structures and brain, psychoacoustics, and counseling skills. If not treated properly with evidence-based best practices, it absolutely can cause harm to the patient. A seminar for a couple of hours on tinnitus management is not sufficient to treat these patients.

One of the most disturbing aspects of expanding the scope of HIS is the lack of provisions to protect our most precious citizens, the pediatric population. Testing and treatment for pediatrics is not the same as testing and treating adults. This requires knowledge of pediatric anatomy and development of the auditory systems as well as understanding of speech and language development. How will you protect Nebraska's children from improper hearing health care? Improperly fit hearing aids at too high of

levels can cause damage to the auditory system. Improperly fit hearing aids at too low levels can result in speech and language delays. Young patients cannot voice if the fitting is poor. Again, how will you prove proficiency and competency by HIS for pediatrics?

If the scope of practice is expanded for HIS, the State of Nebraska will need to modify the qualifications of licensure including a more comprehensive State examination to determine competency and proficiency. To allow HIS to practice an expanded scope without proof of proper knowledge and ability, is completely reckless and severely puts Nebraskans at risk.

Proponents of the expansion argue that there will be more access to hearing health care, when in fact the opposite is likely to happen. If the expansion is passed and as a result the current state examination for licensure is modified to include demonstration of competency and proficiency in these expanded areas including pediatrics, Nebraska will have the unintended consequence of fewer HIS. To encompass the new scope, this modified examination must be equal to or near equal to the National Praxis Exam taken by Audiologists who have graduated with a Doctoral Degree in Audiology to include the expanded scope. The Praxis is a difficult exam that covers all aspects of audiology. It is a challenging proof of competency for those who have studied for years. There is a need for HIS in the State of Nebraska and they have a role. Their role is currently limited to the qualification of their education. They are qualified for their current scope which has a valid place in our State. The number of individuals that will be willing to work hard and study long enough to take such an examination, for a role that was not meant to have extensive education will be extremely limited. The number of individuals without having attended Audiology Graduate programs who will be able to pass such an examination will be even fewer. As a result, there will be fewer HIS in the State of Nebraska.

Proponents of the expansion state that HIS will be able to reduce the stress of having patients transported from care facilities to their offices as many HIS visit care facilities to treat hearing loss. I concur that this is convenient for the patient and the facility; however, there are many health care services that cannot be brought to the patient. The facilities can transport the patient for care. In cases where more than managing hearing aid are needed, are you willing to sacrifice the health of our patients for convenience?

Manufacture owned clinics understand adding terms such as “Tinnitus”, “Earwax Removal”, and “Aural Rehabilitation” to their website will improve Search Engine Optimization (SEO). Expanding the scope of HIS is marketing strategy to sell more hearing aids at its core. It is not about improved patient care. When making the

decision, ask yourself: “Do you care about the health and safety of our Nebraska citizens, or do you care about helping a hearing aid manufacturer make more money?”

Respectfully,

Katherine M. Gamerl, Au.D.

Audiologist