

1-2-2024

The Nebraska Hearing Society (NHS) wishes to thank the Technical Review Committee (TRC) for their time and effort throughout this Credentialing Review process for Hearing Care Professionals. The NHS recommends for the TRC consideration the adoption of International Hearing Society's (IHS) model licensure act (model), *tailored* to Nebraska, that updates a hearing instrument specialist's scope of practice to include cerumen removal, tympanometry, and tinnitus care, as well as corresponding educational requirements. Our recommended scope of practice changes are intended to *protect and better serve* the hearing-impaired citizens of Nebraska.

Hearing Care Professionals want to be working within a well defined scope of practice that, hopefully one day, will be uniform across the United States, as states will allow. As previously mentioned, we recommend for your approval the adoption of the IHS' scope of practice model, the Model (Model), enhanced by suggestions provided by the NE Medical Association.

The IHS, which we are a member of, is a membership association representing hearing healthcare professionals in Nebraska and worldwide. Founded in 1951, IHS continues to recognize the need for promoting and maintaining the highest possible standards for its members in the best interests of the hearing impaired they serve.

Each individual state must harmonize their own statutes, rules, regulations, and terminology with the IHS' Model Act. Many states, including Nebraska, are already using the IHS' International Licensing Exam, commonly referred to as the ILE, as a first mandatory step towards state licensing. Nebraska is also considering the usage of the International Hearing Society's Practical Exam as the final step to obtaining a state license as a NE Hearing Instrument Specialist.

Attached you will find the most current list of states using either or both of these exams. Additionally, attached you will find two sample questions from the written test, which show the topics new trainees are tested on, directly related to services not currently covered in our scope of practice. One important reason for expanding our scope is to be able to work within those certain disciplines and train new applicants.

Feedback we received from interested groups has been a claim that hearing instrument specialists are undereducated on certain topics. We attempted to resolve this by first adding a two-year stipulation to perform these new scope of practice tasks: cerumen removal, tympanometry to measure ear canal volume, and tinnitus care via tinnitus maskers as established and manufactured within hearing instruments.

On average, a hearing instrument specialist works 1,000-2,000 hours yearly, depending on whether they are working part time or full time. With the two-year stipulation a hearing instrument specialist will have received 2,000-4,000 hours of in person training, *before* they would be authorized to perform these new duties.

Secondly, we added additional continuing education requirements for hearing instrument specialists who plan to utilize these new services in their offices.

It is our belief and intent that our recommended scope of practice changes will *protect and better serve* the hearing-impaired citizens of Nebraska..

We hope we have addressed all concerns presented thus far and look forward to the next step of the 407 process. Thank you for your consideration.

Sincerely,

Misti Chmiel, BC-HIS
Board Certified Hearing Instrument Specialist
Nebraska Hearing Society Executive Director