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Doctor of Audiology

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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

Dear Mr. Rosenthal,

I write to you today, as a licensed clinical audiologist, practicing in Lafayette, Colorado, to strongly oppose the scope of practice expansion proposal offered by certain hearing instrument specialists (HIS), affiliated trade organizations, hearing aid manufacturers, distributors, and franchisees, all of whom stand to gain financially from its implementation. This ill-conceived proposal, if enacted, will authorize HIS to perform audiologic diagnostic testing, interpretation, and treatment services, without appropriate training, qualifications, and supervision, putting Nebraskans of all ages at significant risk of financial and physical harm.

As audiologists in an adjoining state, we have grave concerns about this proposal. The surrounding states do not allow hearing aid specialists/dispensers to perform services beyond those designed to advance the sale of hearing aids (share their scope). And, they are specifically NOT allowed to perform diagnostic testing, cerumen management, tinnitus management, or aural rehabilitation under their license, because they are wholly unqualified to do so (just as they are in Nebraska).

We fear that consumers from my state who live in border communities may seek care in Nebraska and unwittingly be harmed by untrained people. It is equally likely that consumers in Nebraska will no longer have confidence in the care that they receive there and will seek treatment in surrounding states, increasing wait times for Colorado citizens or any of the neighboring states.

We urge the Committee to keep Nebraska's statute with those of surrounding states to ensure safe, high-

quality audiologic care for citizens throughout the region. Audiologic services, including diagnostic services, cerumen management, tinnitus evaluation and treatment, and aural rehabilitation are complex procedures that require extensive clinical training. Yet, the HIS proposal includes a list of proposed educational requirements for licensure that ‘grandfather’ existing HIS’ with no increase in training or improved qualifications and feign enhanced requirements for new HIS, that, upon careful inspection, simply maintain the status quo (must be 21 years of age and have a high school education). Further, the proposal allows the educational requirements to be changed arbitrarily at the discretion of the Board.

The requested scope expansion in the HIS proposal is completely out of step with evidence-based practices in the delivery of audiologic care, particularly when evaluated against the licensing and training requirements for similar and related professions. For example, a clinical doctorate (Au.D.) degree is required for audiologists to enter clinical practice in Nebraska and all 50 U.S. states and territories. Physicians and advanced practice providers including nurse practitioners, physician assistants, psychologists, and speech language pathologists are other professionals who are authorized under their licensure to perform these services (in whole or in part).

The HIS proposal is also wholly incongruent with existing scope of practice and educational requirements for audiology assistants in Nebraska. Even though Nebraska requires postsecondary education for registered audiology assistants, they are still not authorized to perform any of the audiologic diagnostic and treatment services described in the HIS proposal.

Occupational licensure laws are designed to protect consumers—not to unfairly protect and advantage industry players seeking only to profit. I urge the Hearing Care Technical Review Committee to reject the HIS scope expansion proposal in its entirety. Please contact me if you have any questions, or if I can provide any additional information or expert testimony.

Respectfully,



Julie Eschenbrenner, Au.D.

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