Dear Mr. Briel,

As a licensed Audiologist practicing in Nebraska, I am writing to express my concerns regarding the recent proposal submitted by the Nebraska Hearing Society. While I understand the intent behind the proposal, I believe there are several issues that need to be addressed.

Firstly, the proposal lacks clarity on how it plans to address potential changes in the scope of practice. As an Audiologist, I am acutely aware of the importance of clearly defined scopes of practice in ensuring patient safety and quality of care. The implications of these changes on existing health professionals and their ability to deliver quality care to patients are not adequately addressed in the proposal.

Secondly, the proposal does not provide sufficient evidence to support the need for new credentialing. The current credentialing system has been effective in maintaining high standards of care and ensuring that health professionals like myself are adequately trained and competent in our respective fields. Introducing new credentialing could potentially disrupt this system and lead to inconsistencies in the quality of care provided.

In this context, it is important to consider the extensive education and training required to become an Audiologist. The Doctor of Audiology (AuD) degree is a professional degree that requires a minimum of 50 credit hours of graduate-level course work in hearing science, audiology, and communication disorders, as well as a minor, an Auditory Doctoral Project, and a clinical externship. Students must also complete a minimum of 1,820 hours of supervised clinical practicum. This is significantly more rigorous than the education required for a hearing instrument specialist, which typically includes a high school diploma or GED, practical experience or an apprenticeship, and state licensure.

It is important to understand these differences and the appropriate path to the broadening of scope of practice for HIS licensure holders is to further their education and become an Audiologist. I think you would agree that you would not want your physician to take shortcuts in their education and clinical skill acquisition. This should be no different when considering the appropriate level of education necessary to perform the proposed tasks included in the scope of practice expansion for HIS holders.

Lastly, I am concerned about the potential impact on public health and welfare. Any changes to the current system should be made with the utmost consideration for their potential impact on public health. The proposal does not provide a comprehensive assessment of how these changes will benefit public health and welfare.

In conclusion, while I appreciate the efforts made by the Nebraska Hearing Society in submitting this proposal, I believe it requires further review and consideration. I urge the committee to consider these concerns when making their decision.

Thank you for your time and consideration.

Sincerely,

Jameson S. Hofker, Au.D., CCC-A

**Doctor of Audiology**