November 13, 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

POSITION: STRONGLY OPPOSE

Dear Mr. Rosenthal,

I write to you today, as a current Doctor of Audiology (Au.D.) student, an audiologist in training, and a daughter and granddaughter to loved ones who are hard of hearing, to strongly oppose the scope of practice expansion proposal of hearing instrument specialists (HIS) in the state of Nebraska.

Audiologists are educated and trained to evaluate, diagnose, treat, prevent, and manage hearing loss and balance disorders, as well as program hearing aids, cochlear implants, assistive listening devices, boneanchored hearing aids, and more. In order to become an Audiologist, one must receive a bachelor's degree in communication disorders, and then obtain an Au.D. or Ph.D, and pass the praxis. This process not only takes a minimum of seven to eight years to complete and 1,820 of clinical hours, but also hundreds of hours of studying and researching.

As a current Au.D. student, I understand the importance of education and training for professionals in hearing healthcare. The coursework of audiologists in training is extensive, detailed, and time-consuming. My classmates and I currently spend eight hours a week in class, 18+ hours a week practicing our skills in clinical settings, numerous hours studying coursework, reading research-based articles, and textbooks. Our knowledge is also frequently tested by requiring us to complete and pass many assignments, quizzes, and exams with an 83% or better.

To become a hearing instrument specialist, the individual must be 21 years of age and have a high school diploma. To become an audiology assistant, one must hold an associate's or bachelor's degree, and yet they are still not allowed to perform any of the audiologic diagnostic or treatment services. Therefore, it is wholly unequal to allow a larger scope of practice for HIS than an audiology assistant given the differences in education requirements. Additionally, I frequently see patients who do not understand the differences between HIS and audiologists. Therefore, I am also concerned that the proposed expansion of scope of practice will further blur the lines for patients.

With the current proposal of the scope of practice expansion for hearing instrument specialists, hearing instrument specialists would be able to perform diagnostic testing, interpretate diagnostic procedures, provide specialized audiological services, and provide treatment services without the appropriate training or skills required. Services the hearing instrument specialists are seeking to perform include variety of diagnostic procedures, cerumen management, tinnitus evaluation and treatment, and aural rehabilitation. In my perspective as a current audiologist in training, it is frustrating to see that that with the proposed expansion of HIS scope of practice, HIS would be able to perform many complex clinical tasks that are unique to the training of otolaryngologists and audiologists. This expansion could undermine years of extensive training and hard work of students in Doctor of Audiology programs.

As a student and family member to loved ones who are hard of hearing, I am highly concerned about the lack of defined training and measures to evaluate the knowledge and skills for HIS to perform these procedures listed above. Furthermore, this proposal would allow for all current HIS to be "grandfathered"

in with no additional training or improved qualifications to provide these specialized services. The proposal does not include any revised requirements for new individuals applying for licensure as an HIS, still only requiring the individual be 21 years of age and have a high school diploma.

In conclusion, I strongly oppose the proposed expansion of scope of practice due to the current training and education requirements of a hearing instrument specialist. Without the proper training and education, an individual should not provide higher services that could cause harm to patients.

I appreciate you taking the time to read this letter and hope you consider this information when moving forward with making a decision regarding this proposal and the hearing healthcare of Nebraskans.

With respect,

Marissa LeDoux

Marissa LeDoux, B.S.