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April 21, 2024

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 email

Position: **STRONG OPPOSITION** to Credentialing Review Proposal by Nebraska Hearing Society (NHS)/International Hearing Society (IHS) for Hearing Care Professionals

Dear Chairmen Rosenthal and Technical Review Committee Members,

Thank you for your time and consideration on this issue to date and going forward. My name is Dr. Nikki Kopetzky, and I'm an audiologist. I am also a licensed hearing instrument specialist (HIS) and have held that license for longer than my audiology license. As a dually licensed Nebraska professional, I am uniquely qualified to testify to the training and education required for both HIS licensure and audiology licensure. Additionally I am the current Vice President of Legislative Affairs for the Nebraska Speech Language Hearing Association (NSLHA) and although I am not representing the NE Hearing Instrument Specialist (HIS) Licensing Board today, in the interest of full disclosure, I feel obligated to also inform you that I am a current member of the Nebraska HIS Licensing board. As you can see, I am active in both the professions of audiology and HIS in Nebraska. Today I'm speaking on behalf of NSLHA's opposition to the HIS scope of practice change proposal, which, from this point on, will be referred to as the proposal.

To date, this has been a long process. There have been many letters and documents submitted for consideration from both the applicant party and their support, as well as the opposition. In preparation for this testimony I have read and reread each document and would like to note the large recurring themes present in both the supporting documentation and the opposing documentation.

One of the themes presented in support of the proposal is a need to expand the HIS scope of practice language in Nebraska to conform to the 2021 International Hearing Society (IHS) Model Licensure Act. While the IHS Model Licensure Act has been mentioned repeatedly in the technical review process, I have been unable to find this document entered for the technical committee's review. Therefore, NSLHA wants to make it clear to the committee members that this document, that has been continually referenced, is a **proposed** version of HIS licensure for states to potentially adopt that was created by the IHS. It, in fact, has never been wholly adopted by any state. The Academy of Doctors of Audiology (ADA) has already submitted an opposition letter that details this out very closely so I'll refer you to that in combination with testimony provided by the ADA today. I mention this now to highlight for everyone that the implication in the proposal and supporting documentation that this IHS Model Licensure Act is either a widely adopted, or a gold standard document in other states is **false**. In fact, when researching the job definition of the HIS, also known as a hearing aid specialist (HAS), it was discovered the HIS/HAS role publicly defined by the IHS on their website, does not even include the procedure additions of tinnitus care or cerumen management that are requested in the proposal. The following was snipped directly from the IHS website (full reference included at end of the document) for the committee's consideration that the repeated claims by the applicant party that the current Nebraska HIS scope of practice is out of line with the IHS definition of an HIS/HAS role are also **largely misleading**:



The Role of a Hearing Aid Specialist

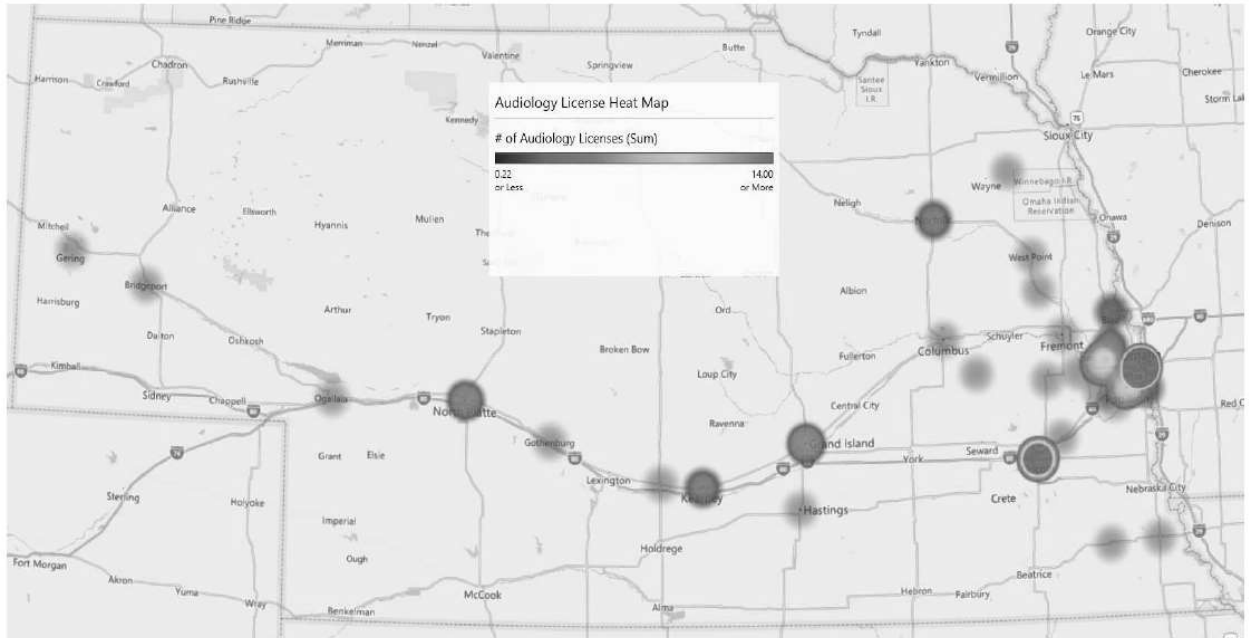
Hearing Aid Specialists are allied health professionals who have the training, knowledge and experience required to address the amplification needs of individuals with hearing loss. The primary employment responsibilities include:

- Administering and interpreting tests of auditory function
- Recommending amplification options
- Making ear impressions
- Fitting and dispensing hearing instruments
- Verifying and validating hearing instrument fittings
- Counseling regarding hearing loss
- Providing aural rehabilitation including options for assistive listening devices
- Providing comprehensive post-fitting care

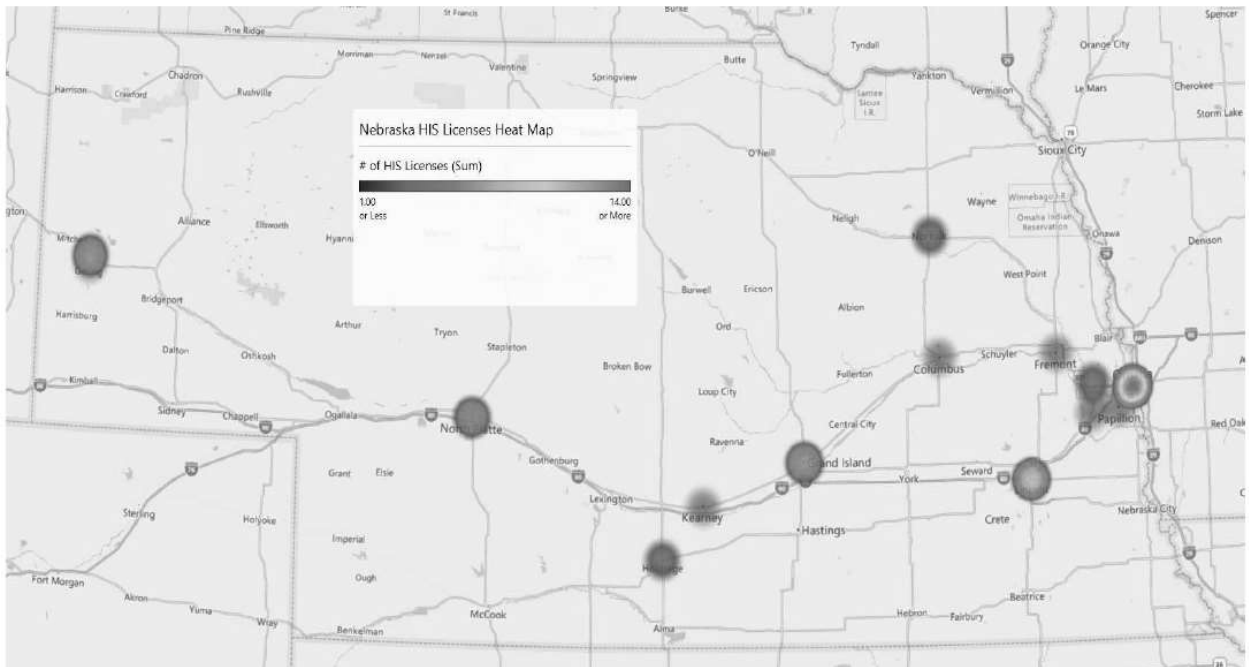
A second recurring theme presented in the proposal and supporting documentation is the scope of practice needs to be updated to allow HIS to provide more services due to lack of availability of qualified care in the rural areas and nursing homes of our state. These statements are also **false**. NSLHA purchased the Nebraska licensure lists for currently licensed audiologists, currently licensed HIS, and the nursing homes in the state of Nebraska earlier this month. As of 4/15/2024, the purchase date of the lists, there are 214 actively licensed audiologists in Nebraska, 171 of whom also list Nebraska addresses. In comparison there are 97 actively licensed HIS in Nebraska, 80 of whom also list Nebraska addresses. When the licensure addresses of each of these licensees are applied to a location heat map, you can see that in

addition to more audiologists in Nebraska, these audiologists also cover more rural areas than the HIS. Please review the heat maps included below:

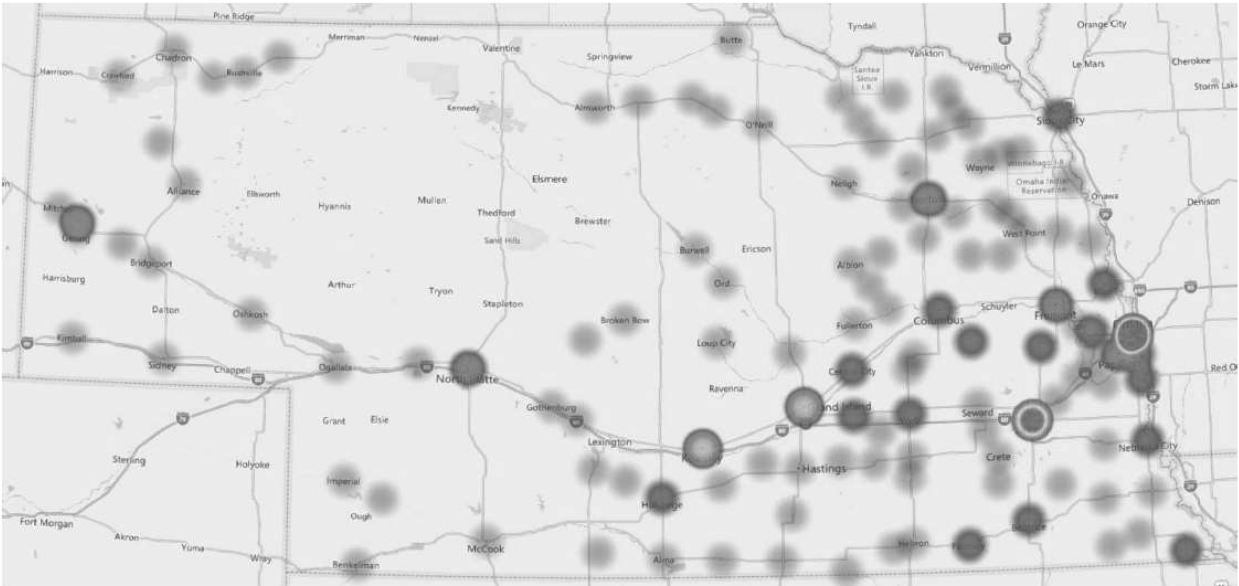
Nebraska Audiologist Location Heat Map



Nebraska HIS Location Heat Map



Nebraska Nursing Homes Heat Map



Concerns with audiologists covering nursing homes were brought forward in past technical review meetings. To this end, NSLHA wishes to add to the record that many of the nursing homes have contracts with HIS that exclude audiologists from providing services to those nursing home residents within the walls of their facilities. This is something Janie York, HIS testified to openly at a previous technical review meeting when describing how she is compensated for her services. She verbally informed the committee she has contracts in place that state she will be the provider of those services and she will be paid for those services at an hourly rate. She additionally mentioned she has contracts with a large number of nursing homes. NSLHA wants to make it clear that It is misleading to imply audiologists do not go to nursing homes when there are HIS making those claims who have contracts in place to keep audiologists out. To show potential nursing home coverage, I have also included the heat map above of those Nebraska nursing home locations so they can be compared with the audiologist and HIS heat maps. Please closely study these and notice that the proposal will not result in more coverage of these facilities, as falsely claimed by the applicant party, as many of those facilities do exist in areas where both audiologists and HIS are hours away and many may already be under contracts that exclude audiology.

A third recurring theme presented in the proposal and supporting documents is the statement that “well-established training” is in place for the additional tests, evaluations, and procedures included in the proposal. It is NSLHA’s stance that this claim is misleading at best. The only additional training mentioned in the application is in 38-1514, Sec 21 (a) where the proposal states “completion of an International Hearing Society approved or board approved cerumen removal course” is added. There is no evidence provided in the proposal to support the claim this training currently exists or is well-established. There continues to be a marked training difference between the doctoring profession of audiology and the sales profession of hearing

instrument dispensing. As a reference, detailed information on this training disparity has been included as an attachment (see NE AUD v HIS training requirements). The HIS training requirements are available in the current Nebraska scope of practice, which is the document the proposal is requesting to alter. References for the audiology training summary include the American Speech and Hearing Association's (ASHA) Council on Academic Accreditation (CAA) standards (attachment included) and the American Academy of Audiology's (AAA) Accreditation Commission for Audiology Education (ACAE) standard (attachment included). These documents are offered as evidence as to why NSLHA believes advancing this proposal to allow healthcare practice by HIS without commensurate training in place for HIS is a large health and safety concern, particularly when the training required to safely provide those additional procedures has been well-defined and well-established in the field of audiology.

NSLHA also completed a summary of the review of the letters submitted as of 4/21/2024 in support of the proposal. For ease of reference, going forward any specific mention of a letter or document will be referred to in the same manner the document is titled on the website that contains all the public data relative to this proposal found at: [https://dhhs.ne.gov/licensure/Pages/Credentialing-Review-\(407\)-Hearing-Care-Professionals.aspx](https://dhhs.ne.gov/licensure/Pages/Credentialing-Review-(407)-Hearing-Care-Professionals.aspx). NSLHA would like to call attention to the fact that many of these letters are copies and pastes of the same letter. There were 18 letters submitted in support, 9 of which were an almost exact copy of the same letter (these include the Drag, Eich, Grace, Kent, Keslar, Marquis, Oreskevich, Sherard, and York letters), another 4 letters were a social worker version of the same letter (noted to be the Abby Stauffer, Katie Van Boskirk, Linda Vogt-Sieh, and Rachel Sjoberg letters). It is questionable how much true interest exists in support of this proposal when there are really only 7 unique statements submitted.

In fairness, NSLHA also reviewed all the opposition documentation available publicly. The main recurrent theme in the opposition documentation is a clear concern for the health and safety of Nebraskans if this proposal should be adopted. This concern is presented in a myriad of ways: lack of training (see the Dr. Andreson letter), lack of hands-on experience and direct patient contact hours in HIS training compared to audiologist training (see the LeDoux letter), and the ambiguous wording in the proposal that allows untrained personnel to act as healthcare providers if adopted (see the Dr. Engleman letter). Some of the opposition letters include instances where, had an audiologist not been involved, important and life-threatening conditions could have been missed. Dr. Boesiger's letter included details about her multiple patients with suicidal ideations from tinnitus. These patients may have followed through with those ideations had she not been involved. Also notable is the Secilmis letter that describes how her own father's vestibular schwannoma could have been missed if he had not sought the skilled care of an audiologist. Additionally, the Dr. Eiten and Dr. Stewart letters both highlight how this proposal is out of line with evidence-based practice, thus putting consumers at unnecessary risk.

Notable in the opposition to the proposal is the presence of national interest. Audiology has three main professional organizations: ASHA, AAA, and the ADA. Another organization, Entheos Cooperative, is the largest cooperative of audiologists in the country. Unique here is all of these organizations are in sync in their opposition to this proposal. All have submitted

testimony and evidence as to why this proposal does not prioritize the health and safety of consumers and why, if it should pass, this could cascade into a national health and safety issue. As I am here representing NSLHA today, I can additionally state that NSLHA, the sole Nebraska professional organization for audiologists, stands with the national organizations and is greatly concerned with the undue health and safety risks put upon Nebraskans if this proposal should pass.

The final opposing theme present in the opposition documentation that stood out in NSLHA's review of the documentation is the concern that the legal statutes for opening up the scope of practice have not been met. Dr. Gamerl's letter details this and Dr. Engleman's letter touches on this as well. I greatly encourage the committee to take a deep dive into both of these letters as you consider the decision at hand.

Since time was taken to provide summary statistics of the documentation posted in support of this application, NSLHA will do the same for the opposing documentation. As of 4/21/2024, there were 43 letters submitted in opposition, 22 were from Nebraskans. Of the Nebraskans submitting in opposition, 13 were audiologists, 2 were speech language pathologists (SLPs), 2 were Nebraska residents, and 5 were audiology graduate students. Of the out of state opposing letters, 8 were from bordering states and include concerns about patients crossing the border and potentially receiving substandard care.

In closing, I want to thank all who have taken their time to submit letters, provide testimony, and attend these meetings whether in person or online. In that light, if you are a person attending today's meeting in opposition to this proposal and someone who currently lives in Nebraska, I'd like you to stand now to have your opposition to this proposal noted.

Thank you all for your time.



Dr. Nikki Kopetzky, Audiologist
NSLHA, VP Legislative Affairs

Attachments:

- Copy of the Nebraska license numbers and licensure status used to create these heat maps in the interest of full and accurate disclosure
- Attachment of current Nebraska audiology and Nebraska HIS training requirements titled "NE AUD v HIS training requirements"
- Current ASHA CAA standards
- Current AAA ACAE standards
- Current IHS role of a hearing aid specialist, also can be found at the following website link:

https://myhome.ihsinfo.org/myhome/Become_Hearing_Aid_Specialist.aspx#:~:text=The%20Role%20of%20a%20Hearing%20Aid%20Specialist&text=Administering%20and%20interpreting%20tests%20of,Fitting%20and%20dispensing%20hearing%20instruments

Other highlighted reference:

- Link to the HIS Scope of Practice 407 review page where all mentioned letters and testimony can be found and reviewed, including the video recordings of the previous technical review committee meetings on this issue:

[https://dhhs.ne.gov/licensure/Pages/Credentialing-Review-\(407\)-Hearing-Care-Professionals.aspx](https://dhhs.ne.gov/licensure/Pages/Credentialing-Review-(407)-Hearing-Care-Professionals.aspx)