February 23, 2024

Mr. Ron Briel, Program Manager
Credentialing Review Program/DHHS Credentialing Review
P.O. Box 94986
Lincoln, NE 68509-4986

RE: 407 Credentialing Review for Hearing Instrument Specialists

Dear Mr. Briel:

On behalf of the American Speech-Language-Hearing Association (ASHA), I write to oppose the revised credential request made by the Nebraska Hearing Society, which would broadly expand the scope of practice for licensed hearing instrument specialists. This expansion would be inconsistent with specialists’ education and training. ASHA opposed the initial request in a letter to the Nebraska Department of Health and Human Services dated October 16, 2023.1

ASHA is the national professional, scientific, and credentialing association for 228,000 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology assistants; and students. Over 1,500 ASHA members reside in Nebraska.2

ASHA is dedicated to expanding consumer access to hearing health services, including hearing aids and other wearable instruments that compensate for impaired hearing. For instance, we support the FDA’s creation of a new category of over-the-counter hearing aids, mandated insurance coverage for hearing services and devices, and expansion of routine hearing screenings by trained providers. We also advocate for reducing unnecessary licensing barriers to hearing services, such as provider referral requirements and restrictions on telehealth.

As part of our commitment to improving access to hearing health, ASHA acknowledges the role of hearing instrument specialists in the fitting and selling of these devices. In Nebraska and several other states, the statutory scope of hearing instrument specialists is limited to measuring hearing solely for making selections, adaptations, or sales of hearing instruments. While including some changes, the revised credentialing review submitted to the Department still proposes to expand the profession’s scope of practice well beyond these providers’ education and training.

**Understanding the Implications of Proposed Credential Changes**

Under the proposed changes, hearing instrument specialists would be permitted to do the following:

- Determine candidacy for referral for cochlear implants or other rehabilitative or medical interventions
- Provide counseling and aural rehabilitation services
- Provide tinnitus management
• Perform “all other acts of hearing assessment” pertaining to dispensing hearing instruments
• Provide cerumen management

These duties are inconsistent with the education and training of hearing instrument specialists. Specialists are trained only to perform tests in order to select, adapt or sell hearing devices or to refer patients for medical management. They are not trained to interpret test results beyond that. While specialists can administer screening questionnaires, they should not assess communication measures, and they do not have the training to counsel on communication strategies or make recommendations based on findings. Specialists are not trained in interpreting audiology measures, such as tests to rule out complex diagnoses of the ear, hearing, or vestibular system. Nor do specialists receive educational training related to tinnitus, cerumen management, aural rehabilitation, or hearing conservation - all of which are being proposed to add to their scope.

ASHA recognizes that the credential request proposes that specialists may only perform aspects of the expanded scope, such as cerumen management, if they receive additional training and certification. However, we do not believe this requirement ensures the appropriate skills to conduct cerumen management, tinnitus management, and aural rehabilitation services or to determine candidacy for cochlear implants.

If the proposed scope of practice expansion were to be enacted, ASHA maintains it would be detrimental to the health of Nebraskans seeking skilled services to address problems with their hearing health. The implications include:
• Inappropriate treatment of cerumen resulting in puncturing an eardrum, which could lead to additional hearing loss and the need for medical management;
• Poor tinnitus management due to a lack of education and training;
• Improper referral for cochlear implants, which requires consultation by an otolaryngologist and audiologist to determine appropriate medical intervention;
• Misdiagnosis of a hearing condition to the detriment of the consumer and undiagnosed underlying conditions causing hearing problems; and
• Provision of inadequate communication assessments and aural rehabilitation services from untrained providers.

Comparing the Qualifications for Audiologists and Hearing Instrument Specialists

The competencies included in the proposed scope of practice expansion encompass the education and training of audiologists but not hearing instrument specialists. The education requirement to obtain a hearing instrument specialist license in Nebraska is a high school diploma or equivalent. In contrast, audiologists hold a doctoral degree in audiology and must complete a supervised post-graduate experience. This education includes extensive foundational education on anatomy/physiology, research applications into practice, 1,600+ hours of clinical experience, and training to treat complex conditions, including cerumen management. An audiologist completes eight years of schooling between undergraduate and graduate programs to ensure an educational foundation that will meet patients’ needs. Audiologists who obtain the CCC-A must complete ongoing professional development, including at least 30 hours of professional development every three years.
Thank you for your consideration of ASHA’s position to oppose the revised credential request from the Nebraska Hearing Society, which would broadly expand the scope of practice for licensed hearing instrument specialists. If you or your staff have any questions, please contact Tim Boyd, ASHA’s director of state health care and education affairs, at tboyd@asha.org.

Sincerely,

Tena L. McNamara, AuD, CCC-A/SLP
2024 ASHA President

3 Examples of complex diagnoses of the ear, hearing, or vestibular system include ototoxicity, retrocochlear pathology, neurologic integrity, and Meniere’s disease. For more information, see Hearing Loss in Adults and Hearing Loss in Children (ASHA.org). https://www.asha.org/practice-portal/clinical-topics/hearing-loss