



March 16, 2021

The Honorable Bob Ramsey, Chairman
Health Subcommittee
Cordell Hull Bldg., Suite 562
Nashville, TN 37243

RE: H.B. 920

Dear Chairman Ramsey:

On behalf of the American Speech-Language-Hearing Association, I write to oppose H.B. 920, which would expand the scope of practice of hearing aid dispensers licensed under T.C.A. Section 63-17-201(8) to include cerumen management.

The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for 218,000 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students. Over 3,700 ASHA members reside in Tennessee.¹

While ASHA shares the committee's desire to reach more individuals in need of cerumen management, ASHA maintains that consumers must have access to a comprehensive hearing evaluation performed by a state-licensed hearing health care professional, such as an audiologist, with an advanced degree. In addition, ASHA maintains that individuals who provide cerumen management must possess the education, training, and skills necessary to evaluate the need for and treatment of conditions associated with excess cerumen.

Audiologist vs. Hearing Instrument Specialist

Audiologists hold a doctoral degree in audiology from a program accredited by the Council on Academic Accreditation (CAA) in Audiology and Speech-Language Pathology of the American Speech-Language-Hearing Association and complete a supervised post-graduate experience during the completion of their doctoral degree courses. All applicants for the Certificate of Clinical Competence in Audiology (CCC-A) have completed coursework and training to treat complex conditions, including cerumen management.² To maintain the CCC-A, audiologists must complete ongoing professional development. In contrast, a hearing instrument specialist (HIS) license in Tennessee only requires the education equivalent to two years of accredited college-level course work.

ASHA maintains that expanding the hearing aid dispenser's scope of practice, without significant education and clinical training, could result in the following:

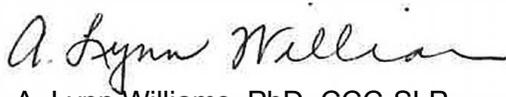
- inappropriate treatment of cerumen resulting in puncturing an eardrum, which could lead to hearing loss;
- poor tinnitus management, due to a lack of education and training;
- improper referral for cochlear implants, which requires consultation by an otolaryngologist or audiologist to determine appropriate medical intervention; and/or

- misdiagnosis of a hearing condition to the detriment of the consumer.

ASHA urges you not to move this bill forward. While H.B. 920 states that hearing instrument specialists may only perform cerumen management if they hold a certification of completion of a cerumen management course, ASHA does not believe this meets the appropriate education, training, and skills necessary to evaluate the need for and treatment of conditions associated with excess cerumen.

Thank you for your consideration of ASHA's position to oppose H.B. 920. 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,



A. Lynn Williams, PhD, CCC-SLP
2021 ASHA President

¹ American Speech-Language-Hearing Association. (2020). *Tennessee* [Quick Facts]. <https://www.asha.org/siteassets/uploadedfiles/Tennessee-State-Flyer.pdf>.

² American Speech-Language-Hearing Association. (n.d.). *External Auditory Canal Examination and Cerumen Management*. <https://www.asha.org/policy/glksp1992-00034/>.