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Legacy. Impact. Possibilities.

February 4, 2025

The Honorable Brian Hardin
Chair, Committee on Health and Human Services
State Capitol #1402
Lincoln, NE 68509

RE: ASHA Opposition to LB 154

Dear Chairman Hardin and Members of the Committee:

On behalf of the American Speech-Language-Hearing Association (ASHA), I write to oppose LB 154, which would broadly expand the scope of practice for licensed hearing instrument specialists in a way that's inconsistent with their education and training.

ASHA is the national professional, scientific, and credentialing association for 234,000 members, certificate holders, and affiliates who are audiologists; speech-language pathologists (SLPs); speech, language, and hearing scientists; audiology and speech-language pathology assistants; and students. Over 1,500 ASHA members reside in Nebraska.¹

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 supported the FDA's creation of a category for over-the-counter hearing aids. We support ongoing efforts to mandate insurance coverage for hearing services and devices, as well as expanding 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 fitting and selling these devices. In Nebraska and other states, the statutory scope of hearing instrument specialists is limited to measuring hearing solely to make selections, adaptations, or sales of hearing instruments. LB 154 proposes to expand these providers' scope of practice well beyond their 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 “any other acts of hearing assessment” pertaining to dispensing hearing instruments
- Interpret tests of human hearing
- Provide cerumen management

These duties are inconsistent with the education and training of hearing instrument specialists. They are trained only to perform tests to select, adapt, or sell hearing devices or 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.² 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 legislation 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 and tinnitus management or to determine candidacy for cochlear implants.

If Nebraska enacted the proposed scope of practice expansion, 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 audiologist and otolaryngologist 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 typically 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 Certificate of Clinical Competence in Audiology must additionally complete ongoing professional development, including at least 30 hours of professional development every three years.³

Thank you for considering ASHA's position to oppose LB 154, 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,



A. B. Mayfield-Clarke, PhD, CCC-SLP
2025 ASHA President

¹ American Speech-Language-Hearing Association. (2023). *Nebraska* [Quick Facts].
<https://www.asha.org/siteassets/advocacy/state-fliers/nebraska-state-flyer.pdf>.

² American Speech-Language-Hearing Association. (n.d.). *Hearing Loss in Adults* (Practice Portal).
<https://www.asha.org/practice-portal/clinical-topics/hearing-loss>

³ American Speech-Language-Hearing Association. (2020). *2020 Standards and Implementation Procedures for the Certificate of Clinical Competence in Audiology*.
<https://www.asha.org/certification/2020-audiology-certification-standards/>