



February 21, 2025

The Honorable Cecelia Gonzalez P.O. Box 96301 Las Vegas, NV 89193-6301

Re: AB 177

Dear Assemblymember Gonzalez:

On behalf of the American Speech-Language-Hearing Association (ASHA), I am writing to comment on AB 177, which makes changes to the regulation of audiology, the fitting and dispensing of hearing aids, and the licensing of speech-language pathology assistants (SLPAs). Many of these updates are crucial, including changes to state law regarding the use of SLPAs. However, the provisions introducing cerumen management and tinnitus care into the fitting and dispensing of hearing aids are inconsistent with clinical best practices and significantly expand the scope of practice for licensed hearing aid specialists beyond their education and training. We strongly urge the legislature to remove these provisions from AB 177—not only to protect Nevadans seeking hearing care, but also to ensure the state swiftly enacts the crucial provisions of this bill.

ASHA is the national professional, scientific, and credentialing association for 241,000 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 1,000 ASHA members reside in Nevada.<sup>1</sup>

## Understanding the Implications of Proposed Changes to the Regulation of Hearing Aid Specialists

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 expand 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 supports the role of hearing aid specialists in the fitting and selling of these devices. In Nevada and other states, the statutory scope of hearing aid specialists is limited to measuring hearing solely for making selections, adaptations, or sales of hearing instruments. AB 177 would expand the profession's scope of practice well beyond these providers' education and training.

ASHA maintains that the proposed scope of practice expansion in AB 177 would be detrimental to the health of Nevadans 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;
- Misdiagnosis of a hearing condition to the detriment of the consumer and undiagnosed underlying conditions causing hearing problems.

These duties are inconsistent with the education and training of hearing aid specialists. Specialists are trained only to perform tests in order to select, adapt, or sell hearing devices or to refer patients for medical management. Moreover, hearing aid specialists do not receive educational coursework on tinnitus or cerumen management, which is proposed to be added to their scope. ASHA recognizes that the proposal specifies that specialists may only perform cerumen management and tinnitus care if they receive additional training and certification. However, we do not believe this requirement ensures the appropriate skills to conduct these services.

## Comparing the Qualifications for Audiologists and Hearing Aid Specialists

The competencies included in the proposed scope of practice expansion encompass the education and training of audiologists but not hearing aid specialists. The education requirement to obtain a hearing instrument specialist license in Nevada 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.<sup>2</sup>

## The Provisions of AB 177 Licensing SLPAs Are Crucial

Licensing of SLPAs helps Nevada to further align with the 41 states that regulate the profession. This will also increase the number of appropriately trained and supervised professionals who can help alleviate provider shortages and help those in Nevada with communication-related disorders.

To ensure this legislation is implemented properly, we also recommend the following revisions:

 Under Sec. 2 – Speech-Language Pathology Assistant Definition, we recommend deleting "engage in the practice of speech-language pathology under the supervision of a supervising speech-language pathologist" and replacing it with "engage in the scope of practice of a speech-language pathology assistant, defined in regulation, under the supervision of a licensed speech-language pathologist." This is needed as Sec. 16 of the current statutes defines this practice as areas that are outside of the scope of a speech-language pathology assistant.

- We also recommend removing this same reference to "practice of speech-language pathology" for speech-language pathology assistants in Sec. 9, 1, and Sec 9, 2, c for the reasons above. In Sec. 10, this same language should be removed for the speech-language pathology assistant.
- Under Sec. 5 Supervising Speech-Language Pathologist Definition, we recommend amending this language to specify that the supervising speechlanguage pathologist is licensed.
- Under Sec. 10 (3), we recommend amending this section by adding the underlined language: "The Board shall adopt regulations regarding the supervision of speech-language pathology assistants including defining direct and indirect supervision and scope of practice, specifying the ratio of supervisors to speech-language pathology assistants, specifying reciprocity provisions for those coming from other states, defining clinical hours and any exam requirements, and specifying continuing education requirements and title protections for speech-language pathology assistants, along with regulations for speech-language pathology provisional licensees and speech-language students."

Thank you for considering ASHA's position on AB 177. If you have any questions, please contact Tim Boyd, ASHA's director of state health care and education affairs, at tboyd@asha.org.

Sincerely,

A. B. Muyfield-Clarke, PhD, CCC-SLP

2025 ASHA President

<sup>&</sup>lt;sup>1</sup> American Speech-Language-Hearing Association. (2023). *Nevada* [Quick Facts]. <a href="https://www.asha.org/siteassets/advocacy/state-fliers/nevada-state-flyer.pdf">https://www.asha.org/siteassets/advocacy/state-fliers/nevada-state-flyer.pdf</a>.

<sup>&</sup>lt;sup>2</sup> 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/