

## State of Nevada Speech-Language Pathology, Audiology and Hearing Aid Dispensing Board

#### **NOTICE OF PUBLIC MEETING**

### **Advisory Committee on Fitting and Dispensing Hearing Aids**

### Thursday, September 21, 2023 ~ 4:30pm

Location: Board Office ~ 6170 Mae Anne Avenue, Suite 1, Reno, Nevada 89523

Supporting materials relating to this meeting will be physically available but in an effort to reduce costs and preserve resources, attendees are encouraged to access electronic copies on the Board's website at <a href="https://www.nvspeechhearing.org/about/Minutes.asp">https://www.nvspeechhearing.org/about/Minutes.asp</a>

#### **Teleconference Access**

#### **ZOOM VIDEO & AUDIO:**

https://us02web.zoom.us/j/83573746361?pwd=R2ZCZ0VNdUsrOHByajJtSnRxYTJZQT09

**AUDIO ONLY BY TELEPHONE:** (669) 900-6833

**Meeting ID:** 835 7374 6361 **Passcode:** 576940

If you are outside the United States or need **toll-free audio access**, please contact the Board office at <a href="mailto:board@nvspeechhearing.org">board@nvspeechhearing.org</a> to request a toll-free number no later than 3:00pm Pacific on the day of the meeting.

#### **AGENDA**

The ADVISORY COMMITTEE ON FITTING AND DISPENSING HEARING AIDS of the NEVADA SPEECH-LANGUAGE PATHOLOGY, AUDIOLOGY AND HEARING AID DISPENSING BOARD may: (a) address agenda items out of sequence (b) combine agenda items or (c) pull or remove items from the agenda at any time. The Board may convene in closed session to consider the character, alleged misconduct, professional competence or physical or mental health of a person. (NRS 241.020, NRS 241.030). Action by the Committee on any item may be to approve, deny, amend, or table.

- 1. Call to Order, Confirmation of Quorum
- 2. Public Comment

No vote may be taken upon a matter raised during a period devoted to public comment until the matter itself has been specifically included on an agenda as an item upon which action may be taken. (NRS 241.020)

- **3.** Election of Committee Chair (for possible action)
- 4. Approval of the Minutes: Advisory Committee on Fitting and Dispensing Hearing Aids of April 12, 2023 (for possible action)

#### 5. Review and Recommendation to the Board on Possible NRS and/or NAC Revisions:

- a. Education and Training Requirements for HAS and HAS Apprentices: NRS 637B.201, NAC 637B.0391, NAC 637B.0392, and/or NAC 637B.0394 (for possible action)
- b. Required Dispensing Examinations and Endorsement for Fitting and Dispensing Hearing Aids: NRS 637B.203, NRS 637B.204, NRS 637B.205, NAC 637B.0373 and NAC 637B.0374 (for possible action)
- c. Practical Examination Fee Increase: NAC 673B.030 (for possible action)
- d. Tinnitus Care in "Practice of fitting and dispensing hearing aids": NRS 637B.055 (for possible action)
- e. Medical Evaluation/Waiver for Sale of Hearing Aids by Catalog, Mail or Internet: NRS 637B.242, NAC 637B.0444, and/or NAC 637B.045 (for possible action)
- 6. Review and Recommendation on Guidance for Scope of Practice Related to Earmold Impressions Pursuant to NRS 637B.055(1) (for possible action)

#### 7. Reports from Committee Chair and Members

- a. Report from Committee Chair and Board Members (for possible action)
- b. Next Meeting: Wednesday, January 17, 2024 at 4:30pm (for possible action)
- c. Future Agenda Items (for possible action)

#### 8. Public Comment

No vote may be taken upon a matter raised during a period devoted to public comment until the matter itself has been specifically included on an agenda as an item upon which action may be taken. (NRS 241.020)

#### 9. Adjournment

(for possible action)

#### **PUBLIC COMMENT**

Public comment is welcomed by the Committee. Public comment will be limited to five minutes per person and comments based on viewpoint will not be restricted. A public comment time will be available prior to action items on the agenda and on any matter not specifically included on the agenda as the last item on the agenda. At the discretion of the Committee Chair, additional public comment may be heard when that item is reached. The Committee Chair may allow additional time to be given a speaker as time allows and in their sole discretion. (NRS 241.020, NRS 241.030)

Prior to the commencement and conclusion of a contested case or a quasi-judicial proceeding that may affect the due process rights of an individual, the Board may refuse to consider public comment. (NRS 233B.126).

#### **ACCOMMODATIONS**

Persons with disabilities who require special accommodations or assistance at the meeting should contact the Board office at (775) 787-3421 or email at <a href="mailto:board@nvspeechhearing.org">board@nvspeechhearing.org</a> no later than 48 hours prior to the meeting. Requests for special accommodations made after this time frame cannot be guaranteed.

#### **AGENDA POSTING & DISSEMINATION**

This meeting has been properly noticed and posted in the following locations:

- Nevada Speech-Language Pathology, Audiology and Hearing Aid Dispensing Board
  - o Board Office: 6170 Mae Anne Avenue, Suite 1, Reno, Nevada 89523
  - Board Website: www.nvspeechhearing.org
- State of Nevada Public Notices Website: <u>www.notice.nv.gov</u>

This agenda has been sent to all members of the Board and other interested persons who have requested an agenda from the Board. Persons who wish to continue to receive an agenda and notice must request so in writing on an annual basis.

#### **SUPPORTING MATERIALS**

Supporting material relating to public meetings of the Speech-Language Pathology, Audiology and Hearing Aid Dispensing Board is available at the Board's administrative office located at 6170 Mae Anne Avenue, Suite 1, Reno, Nevada 89523 on the Board's website at <a href="https://www.nvspeechhearing.org/about/Minutes.asp">https://www.nvspeechhearing.org/about/Minutes.asp</a> or by contacting Jennifer R. Pierce, Executive Director by phone at (775) 787-3421 or email at <a href="mailto:board@nvspeechhearing.org">board@nvspeechhearing.org</a>.

Anyone desiring additional information regarding the meeting is invited to call the Board office at (775) 787-3421 or <a href="mailto:board@nvspeechhearing.org">board@nvspeechhearing.org</a>.



## Call to Order, Confirmation of Quorum

Call to Order, Confirmation of Quorum.

**ACTION:** Meeting called to order.

### **Public Comment**

No vote may be taken upon a matter raised during a period devoted to public comment until the matter itself has been specifically included on an agenda as an item upon which action may be taken. (NRS 241.020).

#### CHAIR: PLEASE READ PRIOR TO CALLING FOR PUBLIC COMMENT:

I will now review the instructions for providing public comment during this meeting:

Any person wishing to make public comment may attend this meeting and provide public comment in one of the following ways:

- Attend the meeting and provide public comment in-person at the physical location; OR
- 2. Attend the meeting and provide public comment virtually through the Zoom teleconference video link listed on the agenda; OR
- 3. Attend the meeting and provide public comment telephonically through the Zoom telephone number listed above. Please see additional public comment instructions at the end of this agenda.

Public comment is welcomed by the Board.

- Public comment will be limited to five minutes per person and comments based on viewpoint will not be restricted.
- A public comment time will be available prior to action items on the agenda and on any matter not specifically included on the agenda as the last item on the agenda.
- At the discretion of the Board Chair, additional public comment may be heard when that item is reached.
- The Board Chair may allow additional time to be given a speaker as time allows and in their sole discretion.
- Prior to the commencement and conclusion of a contested case or a quasi-judicial proceeding that may affect the due process rights of an individual, the Board may refuse to consider public comment.

**ACTION:** Informational only.



### **Election of Committee Chair**

The Board is currently awaiting appointments from the Governor's Office to fill the SLP and Audiologist seats vacated by Tami Brancamp and Michael Hodes. At its July 19, 2023 meeting, the Board elected Andrea Menicucci and Timothy Hunsaker to the Board Chair and Vice Chair positions, and Timothy Hunsaker was appointed to replace Michael Hodes on this Committee.

Pursuant to NAC 637B.034(3), "the Committee shall select a Chair from among the members of the Committee who are members of the Board."

Committee members will be invited to nominate either Lynee Anderson or Timothy Hunsaker for the Chair role during this meeting, and an election vote will be held.

#### **Duties of the Chair**

The Chair presides over all public meetings of the Committee, calling meetings to order, leading and conducting the meeting.

- Decides if a quorum is present before the meeting is opened;
- Leads Committee members into discussion and attempts to have all sides presented;
- Sets the ground rules for time allocation, discussion limits, time of adjournment and keeps focus on the agenda;
- Has the agenda adopted at the start of the meeting and ensures motions are properly voted upon.

#### **Requirements of a Good Chair:**

- Knowledgeable of basic parliamentary procedures
- Leadership ability
- Ability to get along with people while remaining firm and orderly
- Ability to handle critical and controversial issues
- Maintains control of his/her emotions and convictions
- Impartial, exercising common sense and good judgment
- Ability to control ill will or negative thoughts about others in public.

**ACTION:** Approve, table, or take no action on the matter.



Approval of the Minutes: Meeting of the Advisory Committee on Fitting and Dispensing Hearing Aids of April 12, 2023

The minutes of the meeting of April 12, 2023 are presented for approval.

**ACTION:** Approve, table, or take no action on the matter.

**ATTACHMENT(S):** 

1. 2023 4 12 Minutes Not Yet Approved



#### **State of Nevada**

#### Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board

#### MINUTES OF PUBLIC MEETING

Advisory Committee on Fitting and Dispensing Hearing Aids

April 12, 2023

Members Present: Michael Hodes; Lynee Anderson; Nanci Campbell; Jennifer Joy-Cornejo; Melissa Maestas

Members Absent: None

**Staff Present:** Jennifer Pierce, Executive Director

Stacey Whittaker, Licensing Coordinator Henna Rasul, Sr. Deputy Attorney General

**Public Present:** Laura Fink

#### Call to Order, Confirmation of Quorum

Executive Director Pierce began the meeting as Chair Michael Hodes was in another meeting and planned to join late. Ms. Pierce called the meeting to order at 4:38pm. A roll call confirmed a quorum was present.

#### **Public Comment**

There was no public comment.

#### **Approval of the Minutes**

Ms. Pierce asked for corrections or a motion to approve the January 18, 2023 minutes as written. Melissa Maestas made a motion to approve the minutes as written. Jennifer Joy-Cornejo seconded the motion. The motion passed.

## Review and Feedback on Regulation Review and Proposal for Revision/Modification and Draft Report for Executive Order 2023-003

Ms. Pierce presented the draft report for the Governor's Office pursuant to Executive Order 2023-003, which required a comprehensive review of regulations in NAC 637B with suggestions for regulations to revise or remove. The draft report will also be reviewed at the Board's April 26, 2023 meeting, at which time a public hearing will be conducted to solicit stakeholder input on the proposed changes. Discussion resulted in consensus that the report was sufficient and thorough as written, and no revisions were suggested. Ms. Pierce called for a motion. Jennifer Joy-Cornejo made a motion to recommend no changes to the report. Melissa Maestas seconded the motion. The motion passed.

## Review and Recommendation to the Board on Revisions to NRS 637B.050 "Practice of audiology" defined to Include Reference to Required Endorsement for Fitting and Dispensing Hearing Aids

Ms. Pierce recalled that at its January 18, 2023 meeting, the Committee recommended a revision to NRS 637B.050 that clarifies/cites the dispensing endorsement requirement in NRS 637B.205. As such, drafted language was presented in this meeting for review and recommendation to the Board. No changes were suggested, and Ms. Pierce called for a motion. Melissa Maestas made a motion to approve the drafted language and recommend the revision to the Board for a future BDR. Nanci Campbell seconded the motion. The motion passed.

## Review and Recommendations on Investigations of Complaints Related to Fitting and Dispensing Hearing Aids Pursuant to NAC 637B.034

Ms. Pierce explained that NAC 637B.034 establishes the Advisory Committee on Fitting and Dispensing Hearing Aids with a provision that the Committee "shall make recommendations to the Board on all matters relating to the fitting and dispensing of hearing aids, including, without limitation: (d) Investigations of complaints relating to the fitting and dispensing of hearing aids." Per NRS 637B.288 complaint investigation records (with some exceptions) remain confidential. As such, three cases were presented verbally during the meeting without any identifying names or case numbers, and a request that the committee recommend either: 1) dismissal due to insufficient evidence to establish a violation of chapter 637b of the Nevada revised statutes or the Nevada administrative code; 2) filing a formal complaint to proceed with a public hearing where the board may make a finding of fact and impose disciplinary action as deemed appropriate; or 3) further investigation with recommendations for specific information, documents, or witnesses to be considered.

- Case #1: Discussion resulted in consensus to recommend filing a formal complaint. Ms. Pierce called for a motion. Nanci Campbell made a motion to recommend filing a formal complaint. Lynee Anderson seconded the motion. The motion passed.
- Case #2: Discussion resulted in consensus to recommend filing a formal complaint. Ms. Pierce called for a motion. Nanci Campbell made a motion to recommend filing a formal complaint. Lynee Anderson seconded the motion. The motion passed.
- Case #3: Discussion resulted in consensus to recommend filing a formal complaint. Ms. Pierce called for a
  motion. Melissa Maestas made a motion to recommend filing a formal complaint. Nanci Campbell seconded
  the motion. The motion passed.

#### **Update on IHS Practical Exam Revisions and Fees**

Ms. Pierce summarized a meeting held between Board staff and the International Hearing Society (IHS) the prior day regarding revisions to the practical examination that IHS expects to release in the next few months. Ms. Pierce shared an overview of the exam changes and confirmed that IHS plans to increase the fee per exam to \$200.00. The Board currently pays \$50.00 per exam, so this increase will be significant, but IHS is willing to work with the Board on a graduated increase. The current agreement with IHS expires in October 2023 so Ms. Pierce will bring the matter to the Board to approve renewing the contract with a new negotiated rate. This item was informational only and no action was taken.

#### **Reports from Committee Chair and Members**

Ms. Pierce asked the Committee to join her in acknowledging Michael Hodes' service to the Board and as Chair of this Committee as his term draws to an end this July. Committee members and staff thanked Dr. Hodes for his work and wished him well. Ms. Pierce reported that the Committee will likely meet again in August or September 2023, after new appointments have been made to eth Board, and a new Board member will be appointed to Dr. Hodes' seat on the Committee. At that meeting, the Committee will also be tasked with nominating and electing a new Committee Chair from the appointed Board members.

Michael Hodes shared that the University of Nevada Reno does not have funding to hire another audiologist since the prior faculty left the program, and as a result he expects the Board may see a decrease in audiology/hearing aid dispensing applicants coming out of the program.

#### **Public Comment**

There was no public comment.

#### Adjournment

Ms. Pierce adjourned the meeting at 5:55pm.



# Review and Recommendation to the Board on Possible NRS and/or NAC Revisions

a. Education and Training Requirements for HAS and HAS Apprentices: NRS 637B.201, NAC 637B.0391, NAC 637B.0392, and/or NAC 637B.0394

Please refer to the attachment *Standard HAS License Pathway* for a visual chart illustrating what is described below.

- In 2022, the Board approved future legislation to remove NBC-HIS certification as a requirement for a Standard HAS License. This decision highlighted the requirement in NAC 637B.0391 for a HAS Apprentice with no formal education in hearing instrument sciences to complete a 2 year in-service training program, which mirrors the NBC-HIS clinical training requirement to sit for the certification exam. The 2 year requirement was reviewed and reaffirmed as appropriate by this Committee in June 2022.
- Once the NBC-HIS requirement is removed, passage of the dispensing exams will be the only other requirement for a Standard HAS license.
- Currently, the NBC-HIS requirement ensures than an applicant has completed a 2 year training program.
   Notably, however, current NRS also allows the following:
  - Temporary License: An applicant with an out-state license and who holds NBC-HIS certification may apply for a Temporary license, valid up to 1 year while they complete the dispensing examinations (NRS 637B.200).
  - Provisional License: An applicant with an out-state license and who has passed the dispensing examinations may apply for a Provisional license, valid up to 3 years while they complete the NBC-HIS requirements (NRS 637B.201).
- Under the Board's current NRS 637B.193, a Standard HAS license requires either:
  - An associate's degree or bachelor's degree in hearing instrument sciences; OR
  - A high school diploma or its equivalent or an associate's degree or bachelor's degree in any field other than hearing instrument sciences, and successful completion of "a training program in hearing instrument sciences as prescribed by regulation of the Board".
- The NRS reference above to "a training program in hearing instrument sciences as prescribed by regulation of the Board" is addressed in the NAC sections listed below, however these are only written specifically to Apprentices.
- Additionally, there is not currently an option to grant training credit to an applicant who has completed
  all or a portion of a training program in another state but not licensed there. In these cases, the
  applicant typically does not yet qualify for a Standard HAS license, but it also may not be necessary to
  require restarting a full 2 year apprenticeship.



The following are possible revisions to NRS/NAC for consideration to clarify the requirements for an HAS license in the absence of the NBC-HIS requirement:

## NRS 637B.201 Provisional license to practice speech-language pathology or fitting and dispensing hearing aids.

- 1. Upon application and payment of the application fee required pursuant to <u>NRS 637B.175</u>, the Board may issue a provisional license to engage in the practice of:
  - (a) Speech-language pathology to a person who is completing the clinical fellowship requirements for obtaining a certificate of clinical competence issued by the American Speech-Language-Hearing Association.
  - (b) Fitting and dispensing hearing aids to a person who:
    - (1) Holds a license to engage in the practice of fitting and dispensing hearing aids in another state; and
    - (2) Is completing the training required for certification by the National Board for Certification in Hearing Instrument Sciences.
- 2. A provisional license issued pursuant to this section may be:
  - (a) Renewed not more than twice; and
  - (b) Converted to an active Standard license upon payment of the fee required pursuant to NRS 637B.175 for converting the license the award of:
    - (1) A certificate of clinical competence by the American Speech-Language-Hearing Association; or
    - (2) Certification by the National Board for Certification in Hearing Instrument Sciences.

The items in red strikeout above must be removed to align with removal of NBC-HIS certification. Thus, the Provisional HAS license must be revised or removed. The following are options that may be considered, along with other suggestions from the Committee:

- 1. **No longer offer a Provisional HAS License.** Applicants would have three options:
  - HAS Standard License: Requires an out-of-state license, verification that the 2 year training requirement is met, and completion of the required dispensing exams.
  - HAS Temporary License: Requires an out-of-state license and verification that the 2 year training requirement is met. Allows up to one year to complete the required dispensing exams.
  - HAS Apprentice License: Requires an out-of-state license. Any verified training toward the 2
    year requirement could be credited toward the apprenticeship.

OR

- 2. **Continue to offer the Provisional license.** This would still require passage of the dispensing examinations and could be available to either:
  - Any applicant holding a valid out of state license regardless of duration (i.e., one month)
     or
  - An applicant holding a valid out of state license for a minimum duration (i.e., 1 year this aligns with NAC 637B.0398(5)(b) which allows indirect supervision after the first year of an Apprenticeship).

#### AND require either:

- a. No supervision/oversight while completing training. (\*This would not align with Apprentice training requirements); or
- b. Offsite/indirect supervision by a licensed sponsor that aligns with NAC 637B.0398(5)(b) which allows indirect supervision after the first year of an Apprenticeship (\*This may require a revision to NRS 637B.236); or



## Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board Advisory Committee on Fitting and Dispensing Hearing Aids

c. Direct supervision until the 2 year training is completed. (\*This is not recommended as it would duplicate requiring a full HAS license).

## NAC 637B.0391 In-service training for hearing aid specialists and apprentices: General requirements; direct supervision; exemption from participation. (NRS 637B.132, 637B.194, 637B.235)

- Except as otherwise provided in subsection 3, the in-service training of a person who has applied for a
  hearing aid specialist license or has been issued an apprentice license by the Board pursuant to <u>NRS</u>
  637B.195 must consist of:
  - (a) An academic portion, as set forth in NAC 637B.0392; and
  - (b) An on-site training and work experience portion which is competency-based, as set forth in <u>NAC</u> 637B.0394.
- 2. A person who has applied for a hearing aid specialist license must provide official verification of completion of 2 years of in-service training under a licensed audiologist or hearing aid specialist or equivalent in the District of Columbia or any state or territory of the United States. Verification must be completed by the supervising practitioner by signature and date, on a form provided by the Board.
- 2. 3. An apprentice shall participate in the in-service training set forth in subsection 1 under the direct supervision of a sponsor for a minimum of 2 years and, in accordance with <u>NRS 637B.238</u>, may not serve as an apprentice for more than 3 years without passing the examination set forth in <u>NAC 637B.0373</u>.
- 3. 4. An apprentice is not required to participate in the in-service training required by this section if the apprentice:
  - (a) Holds an associate's degree in hearing instrument sciences which is approved by the National Board for Certification in Hearing Instrument Sciences; or
  - (b) Successfully completes a program of education or training in hearing instrument sciences which is approved by the Board.
- 4. 5. If approved by the Board, an apprentice whose license as an apprentice expired but is reinstated may receive credit for not more than 2 years of in-service training completed during the initial license period.
  6. An applicant for a hearing aid specialist license or a person who has been issued an apprentice license by the Board pursuant to NRS 637B.195 may receive credit for verified in-service training completed under a licensed audiologist or hearing aid specialist or equivalent in the District of Columbia or any state or territory of the United States.

## <u>NAC 637B.0392</u> In-service training for hearing aid specialists and apprentices: Contents and approval of academic training; maintenance of list of approved programs. (NRS 637B.132, 637B.194, 637B.235)

- 1. The academic portion of the in-service training of an hearing aid specialist or apprentice required by NAC 637B.0391 must be specific to the training and education necessary to perform competently the duties and responsibilities necessary for the practice of fitting and dispensing hearing aids and must include, without limitation, training and education concerning:
  - (a) Laws and rules relating to ethics;
  - (b) Federal laws and rules governing hearing aids;
  - (c) Infection controls;
  - (d) Basic hearing science;
  - (e) Hearing instrument science and fitting practices; and
  - (f) Audiometric testing and masking.
- 2. Except as otherwise provided in subsection 3, a customized program of academic training and a proposed curriculum must be submitted to the Board for evaluation and approval.
- 3. A program of academic training accepted by the National Board for Certification in Hearing Instrument Sciences, the International Hearing Society or an accredited institution of higher education that meets the minimum requirements of subsection 1 does not require the approval of the Board.
- 4. The Board will maintain a list of approved programs of academic training.



<u>NAC 637B.0394</u> In-service training for hearing aid specialists and apprentices: Requirements for onsite training and work experience; core competencies; review and documentation of progress; report and proof of compliance. (NRS 637B.132, 637B.194, 637B.235)

- 1. The on-site training and work experience portion of the in-service training of an hearing aid specialist or apprentice required by NAC 637B.0391 must consist of a minimum of 16 hours per week and 30 weeks per year and may be completed in conjunction with the academic portion of the in-service training set forth in NAC 637B.0392.
- 2. The on-site training and work experience portion must include, without limitation, the evaluation of the applicant or apprentice's achievement of core competencies concerning:
  - (a) Sanitation protocols;
  - (b) The identification and documentation of the needs of a client;
  - (c) Visual inspections of the ear and otoscopic examinations;
  - (d) Audiometric testing;
  - (e) The results of hearing evaluations;
  - (f) Ear impressions, preparations and molds;
  - (g) Physical and electronic checks of hearing aids;
  - (h) The fitting, programming, troubleshooting, adjusting and repairing of hearing aids; and
  - (i) Client documentation.
- 3. An apprentice and his or her sponsor shall jointly:
  - (a) Review the progress of the apprentice in achieving each core competency set forth in subsection 2; and
  - (b) Document the proficiency of the apprentice in each core competency, by signature and date, on a form provided by the Board.
- 4. The Board may require a sponsor to provide to the Board:
  - (a) A report on the training of and core competencies achieved by an apprentice; and
  - (b) Proof of compliance with the supervisory responsibilities of the sponsor.
- 5. A hearing aid specialist applicant must provide documentation of their proficiency by each supervising licensed audiologist or hearing aid specialist or equivalent in each core competency, by signature and date, on a form provided by the Board.

**ACTION:** Approve, table, or take no action on the matter.

#### **ATTACHMENT:**

- 1. Standard HAS License Pathway
- 2. HAS State-by-State
- 3. HAS Apprentice State-by-State
- 4. HAS Apprentice Summary

### **NEVADA STANDARD HAS LICENSE PATHWAY: 2023 CURRENT**

A	Applicant Type	Apprentice Academic Training may complet	Apprentice On-Site Work Experience e concurrently	Dispensing Examinations  IHS Written ILE Exam passing score of 71% or above, and IHS Practical Exam passing score of 75% or above.	NBC-HIS Certification Requires current state license and 2 years full-time dispensing experience.
OPTION A	Current Out-of-State License in Good Standing	Not Required	Not Required	Required*  If holding NBC-HIS certification, may apply for Temporary HAS License that is valid up to 1 year and eligible to convert upon passage of exams.	Required*  If dispensing exams are completed, may instead apply for Provisional HAS License that is valid up to 1 year and eligible to convert upon certification.
OPTION B	Degree in Hearing Instrument Sciences (Associate's or Bachelor's)	<ul> <li>Required and met through degree from one of the fo</li> <li>Grant MacEwan Hearing Aid Practitioner Program</li> <li>Bates Technical College Hearing Instrument Sciences</li> <li>Burlington County College Hearing Instrument Sciences</li> <li>Douglass College</li> </ul>		Required	Required
OPTION C	Other Education High School Diploma/ Equivalent, or Associate's/ Bachelor's degree in any field other than Hearing Instrument Sciences *Requires HAS Apprentice license to fulfill requirements	<ul> <li>Prescribed Academic Training: Must cover laws and rules relating to ethics; Federal laws and rules governing hearing aids; Infection controls; Basic hearing science; Hearing Instrument science and fitting practices; and Audiometric testing and masking; OR</li> <li>Customized Academic Training: Must be submitted to the Board for evaluation and approval; OR</li> <li>IHS Sanctioned Program</li> </ul>	Prescribed On-Site Training: 2 years Minimum (Minimum 30 weeks @ 16 hours/week)  Must cover sanitation protocols; identification and documentation of the needs of a client; visual inspections of the ear and otoscopic examinations; audiometric testing; results of hearing evaluations; ear impressions, preparations and molds; physical and electronic checks of hearing aids; fitting, programming, troubleshooting, adjusting and repairing of hearing aids; and client documentation.	Required	Required
OPTION D	Expired Nevada HAS Apprentice Eligible for Reinstatement *Requires HAS Apprentice license to fulfill requirements	Requires completion of academic training and on-site of approved by the Board, credit may be granted for up initial license period.	·	Required	Required

### NEVADA STANDARD HAS LICENSE PATHWAY: APPROVED REVISED + PROPOSED REVISED

A	Applicant Type	Apprentice Academic Training may complet	Apprentice On-Site Work Experience e concurrently	Dispensing Examinations  IHS Written ILE Exam passing score of 71% or above, and IHS Practical Exam passing score of 75% or above.	NBC HIS Certification Requires current state license and 2 years full-time dispensing experience.
OPTION A	Current Out-of-State License in Good Standing		Not Required  consider whether a revision is needed to ensure these	Required*  If holding NBC-HIS certification, may apply for Temporary HAS License that is valid up to 1 year and eligible to convert	Required*  If dispensing exams are completed, may instead apply for Provisional HAS License that is valid up to 1 year and
OPTION B	Degree in Hearing Instrument Sciences (Associate's or Bachelor's)	Required and met through degree from one of the fo  Grant MacEwan Hearing Aid Practitioner Program  Bates Technical College Hearing Instrument Sciences  Burlington County College Hearing Instrument Sciences  Douglass College		upon passage of exams.  Required	eligible to convert upon certification.  Required
OPTION C	Other Education High School Diploma/ Equivalent, or Associate's/ Bachelor's degree in any field other than Hearing Instrument Sciences *Requires HAS Apprentice license to fulfill requirements	<ul> <li>IHS Distance Learning Program</li> <li>Other Prescribed Academic Training: Must cover laws and rules relating to ethics; Federal laws and rules governing hearing aids; Infection controls; Basic hearing science; Hearing Instrument science and fitting practices; and Audiometric testing and masking.</li> <li>Customized Academic Training: Must be submitted to the Board for evaluation and approval.</li> </ul>	Prescribed On-Site Training: 2 years Minimum (Minimum 30 weeks @ 16 hours/week)  Must cover sanitation protocols; identification and documentation of the needs of a client; visual inspections of the ear and otoscopic examinations; audiometric testing; results of hearing evaluations; ear impressions, preparations and molds; physical and electronic checks of hearing aids; fitting, programming, troubleshooting, adjusting and repairing of hearing aids; and client documentation.	Required	Required
OPTION D	Expired Nevada HAS Apprentice Eligible for Reinstatement  *Requires HAS Apprentice license to fulfill requirements	Requires completion of academic training and on-site	·	Required	Required
OPTION E	Other Education with Some Training in Another State  *Requires HAS Apprentice license to fulfill requirements	Requires completion of academic training and on-site of the state.	work experience outlined in Option C. to 2 years of in-service training completed in another	Required	Required

### **HAS** | State-by-State Requirements

The information listed below was collected as accurately as possible from publicly available state sources, including state Board websites, forms, laws, and regulations accessed in February and March 2023.

State	HAS Equivalent	Training/Education	Written Exam	Practical Exam	NBC-HIS
Alabama	NBC-HIS Dispenser OR Licensed Hearing Aid Specialist	NBC-HIS Dispenser: Holds NBC-HIS Cert; passage of written/practical/jurisprudence exams. LHAS: Under Sponsorship of NBC-HIS Dispenser; has met Apprentice requirements; passage of written/ practical/ JP exams.	IHS	IHS	No
Alaska	Hearing Aid Dealer	Unable to determine.			No
Arizona	Hearing Aid Dispenser	None; exam passage only.	IHS	STATE	No
Arkansas	Hearing Instrument Dispenser	Education equivalent to 2 years of college-level work from a regionally accredited College or University.	IHS	STATE	No
California	Hearing Aid Dispenser	Completion of trainee period or licensure in another state AND pass both CA written & practical exams.	STATE	STATE	No
Colorado	Hearing Aid Provider (HAP)	At least 6 mos training (300 hours) as an Apprentice under AUD/HAS; OR related AA degree.	IHS		No
Connecticut	Hearing Instrument Specialist	One of the following: A) 20 weeks/no less than 30 hours per week supervised training and 40 hours of instruction covering core content areas; B) IHS distance course and final exam with 40 hours of direct practical supervised training; C) Master's in AUD with coursework covering core content areas; D) Post-secondary coursework in hearing aid dispensing approved on a case-by-case basis by the Dept as covering core content areas.	IHS	STATE	No
DC	Hearing Aid Dispenser	Unable to determine.			No
Delaware	Hearing Aid Dispenser	Completion of Delaware training period and passage of examination; OR license by reciprocity.	IHS		No
Florida	Hearing Aid Specialist	Met the requirements of a Florida sponsored training program OR meets reciprocity requirements OR holds NBC-HIS Cert and actively practicing at least 12 months.	for NBC-HIS		No
Georgia	Hearing Aid Dispenser	Completion of apprenticeship and passage of exams.	IHS	IHS	No
Hawaii	Hearing Aid Dealer and Fitter	None; exam passage only.	IHS		No
Idaho	Hearing Aid Dealer and Fitter	None; exam passage only.	IHS	IHS	No
Illinois	Hearing Instrument Dispenser	Minimum of an AA degree with at least 12 semester/18 quarter hours as follows: 3 hours anatomy and physiology of the speech and hearing mechanism, 3 hours hearing science, 3 hours introduction to audiology, and 3 hours areal rehabilitation or the quarter hour equivalent.	IHS	IHS	No
Indiana	Hearing Aid Dealer	None; exam passage only.	IHS	STATE	No
lowa	Hearing Aid Specialist	Completion of training/supervision and passage of exam.	IHS		No
Kansas	Hearing Aid Dispenser	Temporary training requirements met, or reciprocal licensing.	IHS	STATE	No
Kentucky	Specialists in Hearing Instruments	Completion of Apprenticeship; or completion of a course in the selling or fitting of hearing instruments approved by the board may be considered equivalent to stages I and II of the apprenticeship period.	IHS	STATE	No
Louisiana	Hearing Aid Dealer	Two years of college or accredited higher education; OR continuously engaged in fitting and selling hearing aids during the two years preceding.	IHS	IHS	No
Maine	Hearing Aid Dealer	Completion of trainee program and passage of exams; or reciprocity.	IHS	IHS	No
Maryland	Hearing Aid Dispenser	Completion of training to pass exams; or reciprocity.	IHS		No
Massachusetts	Hearing Instrument Specialist	Completion of 12 month Apprenticeship (including training program and supervised work experience) and meet one of the following: NBC-HIS Cert or passage of exams.	IHS		No
Michigan	Hearing Aid Dealer	Two years experience as a Hearing Aid Salesperson under the direct supervision of a licensed Hearing Aid Dealer.	STATE	STATE	No
Minnesota	Hearing Instrument Dispenser	Completion of trainee program and passage of exams.	IHS	STATE	No
Mississippi	Hearing Aid Specialist	Completion of trainee program and passage of exams.	IHS	IHS	No
Missouri	Hearing Instrument Specialist	Any of the following: 1) AA Degree or higher in hearing instrument sciences; 2) AA degree or higher and completion of IHS Distance Learning Course; 3) Master's or Doctoral degree in AUD; 4) Meets reciprocity options.	IHS	IHS	No
Montana	Hearing Aid Dispenser	Completion of trainee program and passage of exams.	IHS	IHS	No
Nebraska	Hearing Instrument Specialist	None; exam passage only.	IHS	STATE	No

State	HAS Equivalent	Training/Education	Written Exam	Pr <b>prtA3</b> GE	1 1 BC-HIS
Nevada	Hearing Aid Specialist	An associate or bachelor's degree in hearing instrument sciences; OR Have: 1) A high school diploma/equivalent, associate, or bachelor's degree in any field other than hearing instrument sciences, AND 2) have successfully completed a training program in hearing instrument sciences approved by the Board.	IHS	IHS	Yes
New Hampshire	Hearing Aid Dealer	AA Degree in any field; At least 60 credits toward a Baccalaureate degree in any field; OR NBC-HIS Cert for at least 2 years.	IHS	IHS	No
New Jersey	Hearing Aid Dispenser	One of the following: A) 6 months (FT or 12 mos PT) training and experience under direct supervision of NJ HAD; B) Two years of training and experience fitting and dispensing hearing aids; or C) Completion of county college course in hearing aid selection and fitting approved by the Committee.	IHS	STATE	No
New Mexico	Hearing Aid Dispenser	Eight months training, passage of exams.	IHS	IHS	No
New York	Hearing Aid Dispenser	Completion of Trainee education & training; or by reciprocity.	STATE	STATE	No
North Carolina	Hearing Aid Dealer and Fitter	One full year of apprenticeship, with exception to those eligible for waiver under G.S. 93D-5(c) or those applying for licensure pursuant to 21 NCAC 22F .0123.	IHS	STATE	No
North Dakota	Hearing Aid Specialist	Completion of training requirements to pass exam; or reciprocity.	IHS	STATE	No
Ohio	Hearing Aid Fitter	Completion of trainee program and passage of exams.	IHS	STATE	No
Oklahoma	Hearing Aid Dealer & Fitter	High school diploma; passage of exams.	IHS or STATE	STATE	No
Oregon	Hearing Aid Specialist	Completion of Trainee education & training; or by reciprocity.	IHS	STATE	No
Pennsylvania	Hearing Aid Fitter	Completion of Trainee education & training; or by reciprocity.	STATE		No
Rhode Island	Hearing Aid Dealer/Fitter	Completion of apprenticeship and passage of exams.	IHS	STATE	No
South Carolina	Hearing Aid Specialist	High school diploma; passage of exams.	IHS	IHS	No
South Dakota	Hearing Aid Dispenser	Completion of provisional training; passage of exams.	IHS	STATE	No
Tennessee	Hearing Instrument Specialist	Two years of coursework, or its equivalent, from an accredited college or university OR hold NBC-HIS Cert.	IHS	IHS	No
Texas	Hearing Instrument Fitter and Dispenser	Completion of Apprenticeship under the supervision of a licensed individual and 20 hours classroom continuing education in approved subject matter during the one year Apprenticeship.	IHS	STATE	No
Utah	Hearing Instrument Specialist	NBC-HIS Certification or reciprocity.	IHS	IHS	Yes
Vermont	Hearing Aid Dispenser	Completion of training to pass exam.	STATE		No
Virginia	Hearing Aid Specialist	Completion of training and experience under temporary permit, or by reciprocity.	IHS	STATE	No
Washington	Hearing Aid Specialist	Successful completion of two-year degree or nine-month HAS training program.	IHS	IHS*	No
West Virginia	Hearing Aid Dispenser	Completion of training to pass exams; letter from healthcare provider stating they are free from communicable disease.	IHS	STATE	No
Wisconsin	Hearing Instrument Specialist	Completion of training and passage of examinations.	IHS	STATE	No
Wyoming	Hearing Aid Specialist	Experience fitting hearing aids in Wyoming for at least 2 of previous 3 years and 3 written references; or by reciprocity.	IHS	IHS	No

EXAMS	Written	Practical	NBC-HIS
NOT REQUIRED	2	11	49
REQUIRED	49	40	2
IHS EXAM	43	17	
STATE EXAM	5	23	
EITHER/OR	1		
MAY BE WAIVED WITH NBC-IHS CERT	1		

### **HAS Apprentice | Summary**

Sponsor Experience Required (Years)						
AVERAGE	2					
MEDIAN	2					
TOTAL STATES	19/46 (41%)					
State	Years					
Kansas	5					
Oregon	4					
California	3					
Idaho	3					
Kentucky	3					
Mississippi	3					
New Mexico	3					
Florida	2					
lowa	2					
Maine	2					
Maryland	2					
Missouri	2					
Nevada	2					
New Hampshire	2					
North Carolina	2					
Ohio	2					
Alabama	1					
Montana	1					
Wyoming	1					

			1						
<b>Maximum Trainees Per Sponsor</b>									
AVERAG	E	2							
MEDIAN	J	2							
TOTAL STA	TES	31/46 (6	7%)						
State	Max	State	Max						
Alabama	4	North Carolina	2						
Oregon	4	Ohio	2						
Florida	3	Oklahoma	2						
Illinois	3	Tennessee	2						
lowa	3	Texas	2						
Kansas	3	Utah	2						
Maryland	3	Arkansas	1						
North Dakota	3	California	1						
South Dakota	3	Georgia	1						
Wisconsin	3	Massachusetts	1						
Arizona	2	West Virginia	1						
Idaho	2	Wyoming	1						
Kentucky	2								
Louisiana	2	1							
Maine	2	1							
Minnesota	2								

2

2

Nevada New Jersey

**New Mexico** 

Minimum Training Months								
AVERAGE		10						
MEDIAN		12						
TOTAL STAT	ES	44/46 (969	%)					
State	Months	State	Months					
Idaho	24	Virginia	12					
Nevada	24	West Virginia	12					
Utah	24	Wisconsin	12					
Alabama	12	Wyoming	12					
Arizona	12	New Mexico	8					
Arkansas	12	California	6					
Illinois	12	Colorado	6					
lowa	12	Delaware	6					
Kansas	12	Florida	6					
Kentucky	12	Georgia	6					
Massachusetts	12	Maine	6					
Minnesota	12	Maryland	6					
Missouri	12	Michigan	6					
Montana	12	New Jersey	6					
Nebraska	12	Oklahoma	6					
North Carolina	12	Oregon	6					
North Dakota	12	Pennsylvania	6					
Ohio	12	Connecticut	5					
Rhode Island	12	Mississippi	3					
South Carolina	12	New York	3					
South Dakota	12	Tennessee	3					
Texas	12	Vermont	2					

## **HAS Apprentice | State-by-State Requirements**

The information listed below was collected as accurately as possible from publicly available state sources, including state Board websites, forms, laws, and regulations accessed in February and March 2023.

State	Apprentice Equivalent	Training Length (min/max)	Sponsor	Sponsor Experience Required	Maximum Trainees per Sponsor	Training Content
Alabama	Hearing Aid Apprentice Provider	12 -24 months	Licensed Sponsor	1 year	4	Completion of distance learning program to obtain apprentice permit; then sponsorship & training to prepare as HAS.
Alaska	None	-	-	-	-	-
Arizona	Temporary Hearing Aid Dispenser	12 -24 months	Licensed Sponsor	Unable to Determine	2	On-site training and supervision that consists of coordinating, directing, watching, inspecting, and evaluating the fitting and dispensing activities of the temporary hearing aid dispenser; and directly relates to the type of training and education needed to pass the licensing examination.
Arkansas	Hearing Instrument Dispenser Intern	12 - 18 months	Licensed Sponsor	Unable to Determine	1	Program of supervision and training provided by Sponsor.
California	HAD Trainee	6 -10 months	Licensed Sponsor	3 years	1	Sponsor present within the same work setting a minimum of 20% of the time. Sponsor approves selection of a hearing aid by a trainee-applicant and countersigns audiogram/all sales documents. Trainee must take written exam within first 10 months. Training must include: 1) Review of the results of each fitting and sale of a hearing aid; 2) Reevaluation of the fitting and selling techniques of the trainee-applicant at least weekly; 3) Being readily available to the trainee-applicant to render advice and give instruction and assistance in the fitting and selling of hearing aids; d) Instruction in the procedures for the fitting and selling of hearing aids required by Chapter 7.5, Division 2 of the Code; e) Training with instruments and equipment generally considered to produce valid hearing measurements necessary to the fitting and selling of hearing aids.
Colorado	Hearing Aid Apprentice Provider	6 months	Licensed Sponsor	Unable to Determine	Unable to Determine	Minimum 300 hours training in the following areas: a. Taking a case history and review; b. Otoscopy; c. Testing of hearing including air conduction and bone conduction with proper masking when needed; d. Testing of speech including speech recognition threshold (SRT), most comfortable loudness level (MCL), uncomfortable loudness level (UCL), and discrimination with proper masking when needed; e. Interpreting hearing tests and the making of medical referrals as necessary; f. Taking of ear impressions suitable for hearing aids and ear molds; g. Fitting and post-fitting adjustments; h. Checking for proper fit and making needed adjustments, and verifying the hearing aid performance to determine if the hearing aid is correcting and conforming to the hearing loss as expected. This may include, but is not limited to, the user of real ear measurement, word discrimination, aided versus unaided, or other forms of aided measurements as may be standard in the industry; and j. Counseling, including the delivery of the hearing aid, insertion and removal of the hearing aid, instruction on changing the batteries, and education to the user and family as to the expectations and performance.
Connecticut	Hearing Instrument Specialist Temporary	5 months	Licensed Sponsor	Unable to Determine	Unable to Determine	Minimum 30 hours/week and course of study not less than 40 hours covering the following: a) the basic physics of sound; b) anatomy and physiology of the ear; c) the function of hearing aids; d) practical knowledge of fitting and dispensing of hearing aids; e) taking of ear mold impressions; f) use of equipment employed in the fitting and dispensing of hearing aids; and g) state and federal laws and regulations governing hearing instrument specialists and hearing aid devices.
DC	None	-	-	-	-	

State	Apprentice Equivalent	Training Length (min/max)	Sponsor	Sponsor Experience Required	Maximum Trainees per Sponsor	Training Content
Delaware	Hearing Aid Dispenser Temporary	6 - 24 months	Licensed Sponsor	Unable to Determine	Unable to Determine	Direct supervision 100% in first 2 months; 50% in next 2 months; 25% in final 2 months of training period.
Florida	Hearing Aid Specialist Trainee	6 months	Licensed Sponsor	2 years	3	Minimum 20 hours/week totaling 480 hours in 4 stages: Stage I: Complete IHS Distance Learning Course before entering Stage II. Stage II (1 month): May perform audiometric tests, and make ear mold impressions and modifications, but sponsor must be physically present; may not recommend or dispense a hearing aid or counsel a client. Stage III (2 mos): May perform all tasks in Stage II, recommend selection of a hearing aid, and counsel a client but only under direct supervision of sponsor; may not deliver a hearing aid. Stage IV (3 mos): May perform tasks in Stages II and III and deliver hearing aids, but sponsor must be physically present when a hearing aid is delivered.
Georgia	Hearing Aid Dispenser Apprentice	6 - 12 months	Licensed Sponsor	Unable to Determine	1	May dispense hearing aids only under direct supervision and immediate observation of a Georgia licensed hearing aid dispenser.
Hawaii	None	-	-	-	-	-
Idaho	Hearing Aid Dealer and Fitter Provisional	24 months	Licensed Sponsor	3 years (HAS); 1 year (AUD)	2	Plan of training determined by Sponsor providing for adequate direct client contact activities which include assessment, diagnosis, evaluation, screening, treatment, and client management. First 60 days = personal contact daily via audio/visual, in person, or telephone to review assignments/client contacts/hearing aid fittings with immediate feedback. After first 60 days, contact no less than once in each calendar week throughout the remaining period of the permit.
Illinois	Hearing Instrument Dispenser Trainee	12 months	Licensed Sponsor	Unable to Determine	3	12 months of 100% direct supervision until the trainee has obtained a hearing instrument dispenser license.
Indiana	None	-	-	-	-	-
lowa	Hearing Aid Specialist Temporary	12 months	Licensed Sponsor	2 years	3	Supervised training via plan determined by Sponsor. Min 20 hours/week direct supervision in the first 90 days with direct supervision of dispensing of hearing aids, including evaluation, selection, fitting or selling of hearing aids.
Kansas	Hearing Aid Dispenser Temporary	12 months	Licensed Sponsor	5 years	3	Education of 70 hours divided between lecture, hands-on/non-patient practice (min 25 hours), reading/studying, observation, observation of video programs. Direct contact supervision of 50 hours including: 1. Medical Conditions, Red Flags, KS Law, FDA Regulations, Case History 5 hours; 2. Puretone Air & Bone Testing 8 hours; 3. Masking 15 hours; 4. Speech Testing 4 hours; 5. Audiogram Analysis 10 hours; 6. Impression Taking 4 hours; 7. Hearing Aid Fitting, Verification 4 hours; 8. Hearing Aid Testing, Terminology, Specs 2 hours; 9. Types/Causes of Hearing Loss 5 hours; 10. Adjustments, Modifications 5 hours.
Kentucky	Specialists in Hearing Instruments Apprentice	12 - 36 months	Licensed Sponsor	3 years	2	Stage I - Shall work for 30 days under direct supervision, may not fit or test the client for the purpose of selling hearing instruments; Stage II - 150 days under the direct supervision - may conduct testing necessary for the proper selection and fitting of a hearing instrument, and make ear impressions but shall not make delivery or final fitting without direct personal supervision during the actual delivery; Stage III -180 days - work under and be responsible to a licensed sponsor and may engage in all activities of a licensed person.

State	Apprentice Equivalent	Training Length (min/max)	Sponsor	Sponsor Experience Required	Maximum Trainees per Sponsor	Training Content
Louisiana	HAD Temporary Training Permit	Unable to determine	Licensed Sponsor	Unable to Determine	2	Fitting and selling of hearing aids under direct supervision totaling at least 150 contact hours (hour = 55 min) that includes: 25 hours pure tone air conduction, bone conduction, and speech audiometry, recorded or live voice, with 15 required hours being with actual clients; 25 hours of hearing instrument evaluations, including sound-field measurements with recorded or live voice; 20 contact hours of instrument fittings with actual clients; 10 contact hours of earmold orientation types, uses, and terminology; 5 hours earmold impressions and otoscopic examinations of the ear; 15 hours of troubleshooting of defective hearing instruments; 20 hours of case history with actual clients; 10 hours regarding the laws governing the licensing of persons fitting and dispensing hearing instruments and federal Food and Drug Administration and Federal Trade Commission regulations relating to the fitting and dispensing of hearing instruments; 20 hours supplemental work in one or more of the areas described above.
Maine	Hearing Aid Dealer Trainee	6 -18 months	Licensed Sponsor	2 years	2	750 supervised hours in the practice of dealing in and fitting of hearing aids.
Maryland	Hearing Aid Dispenser Limited	6 - 24 months	Licensed Sponsor	2 years	3	Minimum 6 months supervised clinical training.
Massachusetts	Apprentice Hearing Instrument Specialists	12 - 18 months	Licensed Sponsor	Unable to Determine	1	Coursework: IHS Distance Learning Course or Certificate/AA Degree in audiology or hearing instrument technology from an accredited college or university; AND Supervised Practicum totaling 150 hours: 25 hours of pure tone air conduction, bone conduction, and speech audiometry, recorded and/or live voice; 25 hours of hearing instrument evaluations post fitting; 20 hours of instrument fittings with actual clients; 10 hours of earmold orientation types, uses, and terminology; 15 hours of earmold impressions and otoscopic examinations of the ear; 15 hours of troubleshooting of defective hearing instruments; 20 hours of case history with actual clients; 10 hours of Massachusetts general laws and regulations governing the licensing of persons fitting and dispensing hearing instruments and federal Food and Drug Administration and Federal Trade Commission regulations relating to the fitting and dispensing of hearing instruments; and 10 hours of supplemental work in one or more of the above areas.
Michigan	Hearing Aid Dealer Trainee	6 - 12 months	Licensed Sponsor	Unable to Determine	Unable to Determine	Minimum 6 months training under direct supervision.
Minnesota	Hearing Instrument Dispenser Trainee	12 months	Licensed Sponsor	Unable to Determine	2	Direct supervision in all areas tested by the practical examination. Thereafter, may dispense under indirect supervision until expiration of trainee period. Under indirect supervision, must complete 2 monitored activities a week, either by correspondence or telephone/video and include, but are not limited to, evaluation of audiograms, written reports, and contracts.
Mississippi	Hearing Aid Specialist Temporary	3 - 9 months	Licensed Sponsor	3 years	Unable to Determine	Supervision and training with minimum of 1/3 direct, on-site supervision totaling 150 hours, to include: 25 hours pure tone air conduction, bone conduction, and speech audiometry; 25 hours in hearing aid evaluation and post-fit counseling; 20 hours hearing aid fittings with actual clients; 20 hours in earmold orientation, types, uses and terminology; 15 hours earmold impressions and otoscopic examination of the ear; 15 hours trouble-shooting of defective hearing aids; 10 hours case history with actual clients; 3 hours laws governing the licensure of practice, FDA and FTC regulations; and 17 hours of supplemental work in any of the above areas.
Missouri	Hearing Instrument Specialist Temporary	12 - 18 months	Licensed Sponsor	2 years	Unable to Determine	No less than 100 hours of supervision and attend classes that are approved by AAA, ASHA or IHS. 3 hours of training shall be completed every 6 months; however, a person in training less than 6 months need not complete such training.

State	Apprentice Equivalent	Training Length (min/max)	Sponsor	Sponsor Experience Required	Maximum Trainees per Sponsor	Training Content
Montana	Hearing Aid Dispenser Trainee	12 months	Licensed Sponsor	1 year	Unable to Determine	Passage of Written ILE Exam to obtain Trainee license. 1000 hours of supervised training under the direct supervision of the sponsoring licensed hearing aid dispenser. During this time the applicant may do the testing necessary for proper selection and fitting of hearing aids and related devices and make necessary impressions. However, the delivery and final fitting of the hearing aid and related devices must be made by the trainee and the supervisor.
Nebraska	Hearing Instrument Specialist Temporary	12 - 24 months	Licensed Sponsor	Unable to Determine	Unable to Determine	Supervised training to perform the correct procedures for fitting and selling hearing aid instruments. During the first 90 days supervisor must be physically present for at least 80 hours while the temporary licensee is carrying out assigned duties.
Nevada	Hearing Aid Specialist Apprentice	24 - 36 months	Licensed Sponsor	3 years	2	Completion of 2-year in-service training program under sponsorship; in-service training waived for those who have completed a formal education program in hearing instrument sciences.
New Hampshire	Hearing Aid Dealer Training Program	Unable to determine	Licensed Sponsor	2 years	Unable to Determine	Supervised training in: (1) Hearing testing and interpretation; (2) Otoscopic ear examination; (3) Earmold impression procedures; (4) Hearing aid selection and fitting protocol; and (5) Hearing aid troubleshooting and servicing.
New Jersey	Hearing Aid Dispenser Training Permit	6 - 12 months	Licensed Sponsor	Unable to Determine	2	1,040 hours required training over 6 months under direct supervision of a sponsoring NJ HAD on a full-time basis (at least 40 hours per week), or 12 months with at least 20 hours per week. 40 hours of training with an audiometer; 160 hours of hearing aid dispensing procedures, including the taking of earmold impressions, the alteration of earmolds and hearing aids, and application and fitting techniques; Reading all the books and articles relating to hearing aid dispensing specified in a list formulated by the Committee.
New Mexico	Temporary Hearing Aid Dispenser Trainee	8 - 12 months	Licensed Sponsor	3 years	2	Training under direct supervision for a minimum of 320 hours within a three month period. Following completion of 320 hours, additional 5 continuous months of full time work is required. Activities may include dispensing hearing aids, making adjustments in fitting and modifying and repairing hearing aids and ear molds.
New York	Temporary Hearing Aid Dispenser	3 - 24 months	Licensed Sponsor	Unable to Determine	Unable to Determine	Minimum 3 months direct supervision, with 465 training hours: (i) Acoustics: General Principles; (ii) Acoustics: Hearing and Speech; (iii) The Human Ear; (iv) Disorders of Hearing; (v) Puretone Audiometry; (vi) Speech Audiometry; (vii) Hearing Analysis; (viii) Hearing Aids and Instruments; (ix) Infection Control; (x) New York State and Federal Law, Regulations and Professional Conduct.
North Carolina	Hearing Aid Dealer and Fitter Apprentice	12 months - 30 days past exam	Licensed Sponsor	2 years	2	May perform duties within the scope of practice for a Hearing Aid Specialist under sponsor's supervision; at least 27 hours per week/50 weeks. The registered sponsor shall provide the apprentice training in the following areas: (1) anatomy, physiology, and pathology of the auditory mechanism; (2) measurement techniques and test interpretation for assessment of hearing impairment and hearing handicap; (3) hearing aid technology including instrument circuitry and acoustic performance data; (4) design, selection, and modification of ear mold or shell coupling systems; (5) hearing aid selection procedures and fitting, verification, and adjustment techniques; (6) post-delivery care, including hearing aid orientation, counseling techniques, and hearing aid servicing; (7) ethical conduct as set forth in 21 NCAC 22J and regulatory issues concerning the fitting and selling of hearing aids; and (8) all areas within the scope of practice as defined in G.S. 93D-1.1.

State	Apprentice Equivalent	Training Length (min/max)	Sponsor	Sponsor Experience Required	Maximum Trainees per Sponsor	Training Content
North Dakota	Hearing Aid Specialist Trainee	12 - 24 months	Licensed Sponsor	Unable to Determine	3	May engage in training of fitting/sale of hearing instruments for a period of one year under the direct supervision of a license at the same place of business. Complete at least 30 hours of book and visual aid training and at least 10 hours with an audiometer. Minimum of one week with supervisor before first public contact alone. After initial week, must spend 1 day/week physically with supervisor. May not sell a hearing instrument without first consulting with the supervisor and obtaining the supervisor's approval.
Ohio	Hearing Aid Fitter Trainee	12 - 24 months	Licensed Sponsor	2 years	2	Direct physical supervision in first 90 days; must submit all testing and sales documents to Sponsor whether consummated or not.
Oklahoma	Hearing Aid Dealer & Fitter Temporary	6 - 12 months	Licensed Sponsor	Unable to Determine	2	Direct on-site supervision and training to pass exams.
Oregon	Hearing Aid Specialist Trainee	6 - 12 months	Licensed Sponsor	4 years	4	Direct supervision no less than six (6) months/no more than one (1) year on: Theory: Completion of IHS Distance Learning; must be completed to the point Supervisor determines trainee is competent to begin practical training. Practical: 520 hours of practical training in specified core competencies; training time w/in each specified category is required, but sequence of training may be determined by Supervisor: 60 Hours Audiometric Testing, 60 Hours Counseling Regarding Hearing Examination, 60 Hours Hearing Aid Selection, 60 Hours Ear-Mold Impressions, 180 Hours Hearing Aid Fitting and Follow-Up Care, 60 Hours Business Practices: Ethics and Regulations; Sanitation and Infection Control; Electives: 40 hours may be completed in any of the above categories.
Pennsylvania	Hearing Aid Fitter Apprentice	6 - 18 months	Licensed Sponsor	Unable to Determine	Unable to Determine	Period 1: Two months under immediate direct supervision in the same office as the sponsor. Period 2. Min 4 months but is automatically extended to include any period beyond four months in which a trainee/apprentice holds an active apprentice registration. Covering: 1. Anatomy and physiology of the ear; 2. Function of hearing aids; 3. Knowledge and understanding of the grounds for revocation, suspension or probation of the registrant as outlined in this act; 4. Knowledge and understanding of violations and penalties as outlined in this act; 5. Procedures and use of equipment established by the department for the fitting and selling of hearing aids; 6. Taking ear mold impressions; 7. Evidence of knowledge regarding the medical and rehabilitation facilities for children and adults that are available in the areas served; 8. A knowledge of criteria for medical referral when found to exist either from observation by the registrant or on the basis of information furnished by the prospective hearing aid user to include the following: i. Visible congenital or traumatic deformity of the ear; ii. Active drainage of the ear within the previous 90 days or history of this symptom; iii. Sudden or rapidly progressive hearing loss within the previous 90 days or history of this symptom; iv. Acute or chronic dizziness; v. Unilateral hearing loss of sudden or recent onset within the previous 90 days; vi. Visible evidence of cerumen accumulation or a foreign body in the ear canal; vii. Pain in the ear within the previous 90 days.
Rhode Island	Hearing Aid Dealer/Fitter Temporary	12 - 24 months	Licensed Sponsor	Unable to Determine	Unable to Determine	Twenty (20) hours per week of direct supervision for the first thirty (30) days of training; review of all audiograms, sales and other records for the second thirty (30) days of training; and periodic review of audiograms, sales and other records for the remainder of the training period.
South Carolina	Hearing Aid Specialist Temporary	12 months	Licensed Sponsor	Unable to Determine	Unable to Determine	A person holding a valid hearing aid specialist license shall supervise and train the applicant, maintain adequate personal contact, and make quarterly reports to the department about the performance of the person holding the temporary permit.

State	Apprentice Equivalent	Training Length (min/max)	Sponsor	Sponsor Experience Required	Maximum Trainees per Sponsor	Training Content
South Dakota	Provisional Hearing Aid Dispenser	12 months	Licensed Sponsor	Unable to Determine	3	40 hours direct supervision during first week. Eight hours direct supervision weekly during the period of provisional licensure. 1. Completion of Training Manual for Professionals is suggested; 2. Thorough understanding of FDA hearing aid regulations and IHS Code of Ethics ability to apply as required; 3. Applicants are graded on sanitary habits and proper sterilization of equipment; 4. Applicants must be familiar with the audiometer in use, and all its functions; 5. Applicant must be able to define and interpret conductive, mixed and sensorineural types of hearing loss from audiogram examples.
Tennessee	Hearing Instrument Specialist Apprentice	3 - 12 months	Licensed Sponsor	Unable to Determine	2	Minimum 3 months training under direct supervision of sponsor, with completion of 60 classroom hours of prescribed coursework.
Texas	Hearing Instrument Fitter and Dispenser Apprentice	12 - 24 months	Licensed Sponsor	Unable to Determine	2	20 hours classroom education in approved subjects plus 150 hours direct supervised practicum and 10 hours of masking. Sponsor must periodically conduct a formal evaluation of progress.
Utah	Hearing Instrument Intern	24 - 36 months	Licensed Sponsor	Unable to Determine	2	4,000 hours direct and indirect supervision to achieve a passing score on the practical examination and award of NBC-HIS Certification.
Vermont	Hearing Aid Dispenser Temporary	2 months - 60 days past exam	Licensed Sponsor	Unable to Determine	Unable to Determine	Direct supervision to conduct and interpret hearing tests and making earmolds or impressions, for a period of two months following issuance of the license or until the license expires, whichever occurs first.
Virginia	Hearing Aid Specialist Temporary	12 - 18 months	Licensed Sponsor	Unable to Determine		Sponsored training in: 1. Basic physics of sound; 2. Basic maintenance/repair of hearing aids; 3. Anatomy and physiology of the ear; 4. Introduction to psychological aspects of hearing loss; 5. Function of hearing aids & amplification; 6. Visible disorders of the ear requiring medical referrals; 7. Practical tests utilized for selection/modification of hearing aids; 8. Pure tone audiometry, including air conduction, bone conduction & related tests; 9. Live voice or recorded voice speech audiometry, including speech reception testing & speech discrimination testing; 10. Masking when indicated; 11. Recording & evaluating audiograms & speech audiometry to determine proper selection & adaptation of hearing aids; 12. Taking earmold impressions; 13. Proper earmold selection; 14. Adequate instruction in proper hearing aid orientation; 15. Necessity of proper procedures in after-fitting checkup; 16. Availability of social service resources & other special resources for the hearing impaired; 17. Joint review of Board for Hearing Aid Specialists and Opticians Regulations.
Washington	None	-	-	-	-	-
West Virginia	Hearing Aid Dispenser Trainee	12 months	Licensed Sponsor	Unable to Determine	1	Practice under direct supervision of sponsor in the same office for the duration of the temporary trainee permit.
Wisconsin	Hearing Instrument Specialist Trainee	12 - 24 months	Licensed Sponsor	Unable to Determine	3	Allowed to practice fitting hearing instruments, make ear impressions and make measurements of human hearing, for the purpose of fitting hearing instruments, for a period of one year and only while under the direct supervision of a licensed HAS or AUD.
Wyoming	Hearing Aid Specialist Permittee	12 - 24 months	Licensed Sponsor	1 year	1	May engage in the fitting, dispensing or sale of hearing aids for a period of 1 year under supervision.



## b. Required Dispensing Examinations and Endorsement for Fitting and Dispensing Hearing Aids for Dispensing Audiologists: NRS 637B.205

This matter was previously before the Committee and a request has been made to revisit the item, specific to the requirement for an Audiologist to hold the required endorsement and/or pass both the written ILE and practical dispensing exams.

Research on national standards for reciprocity indicates the following:

- Nevada is 1 of 13 states requiring a separate license/endorsement for an Audiologist to dispense hearing aids.
- Of those 13 states, 10 require the written dispensing exam, and only 4 require the practical exam.
- For a HAS license, Nevada is 1 of 44 states requiring the written dispensing exam, and one of 16 states requiring the practical exam.

(See attachment 6.a.1: State Trends: Dispensing Examinations 2023)

Dispensing Audiologist applicants to this Board have the following options:

- New Grad or Not Currently Licensed in Another State: Submit a full application and wait to be licensed once the required written and practical exams are complete; or
- Currently Licensed in Another State: May apply for a Temporary license, valid for one year while taking exams.

In June 2022 the Committee heard this matter and unanimously recommended no changes made to the current examination requirements. "Citing the safety of the public and consumers, it was agreed that both examinations serve important protective functions to ensure that only qualified and skilled practitioners are licensed in Nevada. Specific examples were cited of states not requiring any examinations to fit and dispense hearing aids, and anecdotal examples of practical exam test-takers licensed elsewhere who performed poorly on the exam." (6/21/2022 Meeting Minutes )

It was reported that fitting & dispensing content varies within AuD program curricula, and the Praxis exam does not include a practical component, so it could not be assumed that any AuD-D applicant has received comprehensive training in this area as part of the AuD degree. Board staff follow-up to locate out-of-state proctor options revealed no available alternatives.

Between FY20 and FY23, this Board administered a total of 88 practical exams, of which 48 were completed by Dispensing Audiologist applicants. Of those 48, only 3 exams (6%) resulted in a failure on the first attempt, compared to 22% of HAS applicants and 29% of HAS Apprentices seeking conversion to a HAS license as illustrated below:

	AUD	HAS	HAS-A	TOTAL
Total	48	18	24	88
Fail	3 (6%)	4 (22%)	7 (29%)	14 (16%)

Should the Committee elect to recommend a revision to the Board, the following are potential options:

## 1. Revision to NRS 637B.205, to remove the examination and endorsement requirement for dispensing audiologists:

NRS 637B.205 "An audiologist or an applicant for a license to engage in the practice of audiology who wishes to engage in the practice of fitting and dispensing hearing aids must:



- 1. Request an endorsement of the license to engage in the practice of fitting and dispensing hearing aids; and
- 2. Pass an examination prescribed by the Board pursuant to NRS 637B.194. The examination must be identical to the examination required for the licensure of hearing aid specialists."

## 2. Revision to NRS 637B.203 and .204, to expand issuance of a License by Endorsement to a Dispensing Audiologist currently licensed in good standing in another state:

NRS 637B.203 Expedited license by endorsement to practice audiology or speech-language pathology: Requirements; procedure for issuance.

1. The Board may issue a license by endorsement to engage in the practice of audiology or speech-language pathology to an applicant who meets the requirements set forth in this section. An applicant may submit to the Board an application for such a license if the applicant holds a corresponding valid and unrestricted license to engage in the practice of audiology or speech-language pathology, as applicable, in the District of Columbia or any state or territory of the United States.

## 3. Revision to NAC 637B.0373 and NAC 637B.0374 to provide an exception to the required examinations for a Dispensing Audiologist licensed in another state:

NAC 637B.0373 Examination for license to engage in practice of fitting and dispensing hearing aids: Contents; eligibility; passing score; authorization to retake upon payment of fee. (NRS 637B.132, 637B.175, 637B.191, 637B.194)

- 1. The examination prescribed by the Board pursuant to NRS 637B.194 must consist of a written portion and a practical portion. The examination may also include a portion that tests the familiarity of an applicant with the provisions of this chapter and chapter 637B of NRS and all other federal laws and regulations relevant to the practice of fitting and dispensing hearing aids in this State.
- 2. To be eligible to take the examination set forth in subsection 1, an applicant must:
  - a. File a completed application with the Executive Director of the Board; and
  - b. Pay the examination fee prescribed by NAC 637B.030.
- 3. The Board will establish the passing score for the examination set forth in subsection 1.
- 4. If an applicant does not achieve a passing score on the examination set forth in subsection 1, as established by the Board pursuant to subsection 3, he or she may retake the examination upon payment of the examination fee prescribed by NAC 637B.030.
- 5. The Board may approve and accept a passing score obtained on a written examination taken within the immediately preceding 12 months if the examination taken by the applicant was substantially the same as the written portion of the examination prescribed by the Board.

NAC 637B.0374 Temporary license to engage in practice of fitting and dispensing hearing aids issued to hearing aid specialist or dispensing audiologist: Requirement to take examination; renewal; expiration. (NRS 637B.132, 637B.191, 637B.194)

- A hearing aid specialist or dispensing audiologist must take the written portion and the practical portion
  of the examination concerning the practice of fitting and dispensing hearing aids prescribed pursuant to NRS
  637B.194 and NAC 637B.0373 within 6 months after the Board issues a temporary license to engage in the
  practice of fitting and dispensing hearing aids to the hearing aid specialist or dispensing audiologist pursuant to
  NRS 637B.200.
- 2. Except as otherwise provided in subsection 3, the Board will renew a temporary license to engage in the practice of fitting and dispensing hearing aids, which has been issued to a hearing aid specialist or dispensing audiologist pursuant to NRS 637B.200, for an additional 6 months if the hearing aid specialist or dispensing audiologist has:
  - (a) Taken the examination required pursuant to subsection 1; and
  - (b) Not achieved a passing score on the written portion or the practical portion of the examination.
- 3. If a hearing aid specialist or dispensing audiologist does not take the examination required pursuant to subsection 1 within the prescribed time, the temporary license expires and will not be renewed or reissued by the Board.



**4. Recommendation to pursue NRS revision for membership in the** ASLP Interstate Compact (ASLP-IC) The Board previously heard a presentation from the ASLP-IC, an interstate compact intended to provide a single-point entry for AuD and SLP licensure through a home state with expedited "privilege to practice" in participating compact states. The ASLP-IC Commission held its initial meeting in January 2022 to begin establishing rules and bylaws and to date, there are 29 member states, with applications for compact privileges anticipated to open in early 2024. This compact does not include Hearing Aid Specialists.

**ACTION:** Approve, table, or take no action on the matter.

**ATTACHMENT:** 

1. State Trends: Dispensing Examinations 2023

### **State Trends: Dispensing Examinations 2023**

State	Written	License Type	Practical	License Type	Practical Fee	Practical Frequency/ Location
Alabama	IHS	HAS	IHS	AUD & HAS	\$200.00	3x year
Alaska						
Arizona	IHS	HAS	STATE	HAS	UTD	Varies
Arkansas	IHS	HAS	STATE	HAS	\$75.00	UTD
California	STATE	HAS	STATE	HAS	\$500.00	Sacramento
Colorado	IHS	HAS				
Connecticut	IHS	HAS	STATE	HAS	\$200.00	UTD
DC						
Delaware	IHS	HAS				
Florida	IHS*	HAS	*(Waived for NBC-HIS	Certification)		-
Georgia	IHS	HAS	IHS	HAS	UTD	UTD
Hawaii	IHS	HAS				
Idaho	IHS	HAS	IHS	HAS	\$100.00	UTD
Illinois	IHS	HAS	IHS	HAS	\$300.00	UTD
Indiana	IHS	HAS	STATE	HAS	UTD	4x year
lowa	IHS	AUD & HAS				,
Kansas	IHS	HAS	STATE	HAS	\$25.00	Spring & Fall
Kentucky	IHS	AUD & HAS	STATE	HAS	\$150.00	UTD
Louisiana	IHS	HAS	IHS	HAS	\$75.00	UTD
Maine	IHS	HAS	IHS	HAS	\$50.00	2x year
Maryland	IHS	HAS			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,
Massachusetts	IHS	HAS				
Michigan	STATE	HAS	STATE	HAS	UTD	UTD
Minnesota	IHS	AUD & HAS	STATE	HAS	\$1,200.00	4x year; St. Paul
Mississippi	IHS	HAS	IHS	HAS	\$125.00	UTD
Missouri	IHS	HAS	IHS	HAS	\$150.00	2-5x year; Jefferson City
Montana	IHS	HAS	IHS	HAS	\$550.00	UTD
Nebraska	IHS	HAS	STATE	HAS	UTD	3x year
Nevada	IHS	HAS	IHS	AUD & HAS	\$200.00	By Appt: LV, Carson, Reno
New Hampshire	IHS	HAS	IHS	AUD & HAS	UTD	2x/year
New Jersey	IHS	HAS	STATE	HAS	\$75.00	2x/year
New Mexico	IHS	HAS	IHS	AUD & HAS	\$200.00	4x/year
New York	STATE	HAS	STATE	HAS	\$50.00	UTD
North Carolina	IHS	HAS	STATE	HAS	\$75.00	4x/year
North Dakota	IHS	AUD & HAS	STATE	HAS	UTD	UTD
Ohio	IHS	HAS	STATE	HAS	UTD	Monthly; Columbus
Oklahoma	IHS or STATE	HAS	STATE	HAS	\$95.00	4x/year; OKC
Oregon	IHS	HAS	STATE	HAS	\$175.00	4x year: Salem
Pennsylvania	STATE	HAS				,
Rhode Island	IHS	HAS	STATE	HAS	UTD	UTD
South Carolina	IHS	HAS	IHS	HAS	\$50.00	UTD
South Dakota	IHS	HAS	STATE	HAS	UTD	2x year
Tennessee	IHS	HAS	IHS	HAS	\$175.00	UTD
Texas	IHS	HAS	STATE	HAS	\$100.00	3rd Party Vendor
Utah	IHS	HAS	IHS	HAS	UTD	3rd Party Vendor
Vermont	STATE	HAS				
Virginia	IHS	AUD & HAS	STATE	HAS	\$90.00	4x year; Richmond
Washington	IHS	HAS	IHS*	HAS	\$350.00	4x year
West Virginia	IHS	HAS	STATE	HAS	\$150.00	UTD
Wisconsin	IHS	HAS	STATE	HAS	UTD	4x year
Wyoming	IHS	HAS	IHS	HAS	\$300.00	At least 2x year

		Written	Practical
States Requiri	ng Exam	49	40
De Linnan Temp	AUD	5 (10%)	4 (10%)
By License Type	HAS	49 (100%)	40 (100%)
	State Version	43 (88%)	17 (42.5%)
Version Used	IHS	5 (10%)	23 (57.5%)
	State or IHS	1 (2%)	0 (0%)

Practical Fee Average	\$206.61
Nevada	\$200.00
Nevada + / -	\$6.61



#### c. Practical Examination Fee Increase: NAC 673B.030

The Board's NRS 637B.175 sets a fee cap of \$300.00 for the examination. The actual fee charged is \$200.00 as established in NAC 673B.030. Notably, this is the only fee that is not already at the maximum cap limit.

IHS has reported that the practical exam has been revised and will be released in the near future, including an increase in the cost of the exam booklets. Our Board has benefited from a negotiated rate of \$50 per exam booklet (vs. \$100 paid by other entities) and the new rate may be as high as \$200 per booklet. Any rate increase poses a negative fiscal impact for the Board. The \$200 fee currently paid by each examinee covers \$50 for the exam booklet, \$100 paid to the exam proctor, and nets the Board \$50 to cover staff & scheduling costs.

IHS has offered a graduated budget increase, and a draft contract currently in negotiations would increase the cost to the Board to \$100 per booklet beginning 1/1/2024. This increase will result in the current \$200 rate covering only the cost of the booklet and the reimbursement paid to the exam proctor. An assessment of fees charged by similar Boards in Nevada, and practical examination fees in other states indicates that the \$200 currently charged by this Board is lower than both averages:

Board	Examination Fee	<b>Licensees</b> (as of June 2023)	Source
Oriental Medicine	\$1,000.00	98	NAC 634A
Funeral	\$375.00	572	NRS 642
Optometry	\$250.00	1,257	NRS 636
Speech-Audiology-Hearing	\$200.00	1,576	NAC 637B
Marriage & Family Therapists	\$200.00	4,421	NAC 641A
Chiropractic Physicians	\$125.00	1,306	NAC 634
Alcohol, Drug, & Gambling Counselors	\$100.00	1,668	NAC 641C
Physical Therapists	\$25.00	4,062	NAC 640
Psychological Examiners	Cost to Board + \$100	689	NAC 641
Athletic Trainers	None Listed	299	NAC 640B
Environmental Health Specialists	None Listed	283	NAC 625A
Massage Therapists	None Listed	5,643	NAC 640C
Occupational Therapists	None Listed	1,745	NAC 640A
Osteopathic Medicine	None Listed	2,876	NAC 633
Podiatry	None Listed	212	NAC 635
Social Workers	None Listed	4,482	NAC 641B
Average	\$284.38	1,949	
Speech-Audiology-Hearing	\$200.00		-

\$84.38

National Practical Exam Average\* \$206.61

Nevada \$200.00

Nevada + / - \$6.61

\*23 states use the IHS exam, while 17 use their own state-developed version

**ACTION:** Approve, table, or take no action on the matter.

Fee + / -

**ATTACHMENT: None** 



#### d. Tinnitus Care in "Practice of fitting and dispensing hearing aids": NRS 637B.055

The Board recently received an inquiry regarding whether Hearing Aid Specialists are allowed to treat tinnitus as part of their scope of practice, as there is no reference in NRS or NAC currently.

NRS 637B.055 "Practice of fitting and dispensing hearing aids" means measuring human hearing and selecting, adapting, distributing or selling hearing aids and includes, without limitation:

- 1. Making impressions for earmolds;
- 2. Administering and interpreting tests of human hearing and middle ear functions;
- 3. Determining whether a person who suffers from impaired hearing would benefit from a hearing aid;
- 4. Selecting and fitting hearing aids;
- 5. Providing assistance to a person after the fitting of a hearing aid;
- 6. Providing services relating to the care and repair of hearing aids;
- 7. Providing supervision and in-service training concerning measuring human hearing and selecting, adapting, distributing or selling hearing aids; and
- 8. Providing referral services for clinical evaluation, rehabilitation and medical treatment of hearing impairment.

It is understood that hearing aids are used for tinnitus masking and treatment, but this is not the same as fitting for hearing loss, tinnitus treatment requires training and counseling beyond the initial hearing aid fitting.

IHS offers a <u>Tinnitus Care Provider Certificate</u> earned during a three-day training workshop and assessment that culminates in a Tinnitus Care Provider certificate.

IHS also advises practitioners that "If you use the title, "Tinnitus Care Provider" you must also state "Holding a Certificate from the International Hearing Society." This certificate title does not replace your job title. Certificate holders must check with their own state/provincial licensing agencies for rules, regulations and scope of practice regarding providing tinnitus care. All Tinnitus Care Provider Certificate Program participants and certificate holders are expected to understand and abide by all applicable local, state/provincial, and federal laws and rules governing scope of practice, licensure/registration requirements, and permissible titles."

The matter is brought to the Committee to consider whether to recommend a revision to the NRS to address tinnitus care in the scope of practice.

**ACTION:** Approve, table, or take no action on the matter.



e. Medical Evaluation/Waiver for Sale of Hearing Aids by Catalog, Mail or Internet: NRS 637B.242, NAC 637B.0444, and NAC 637B.045

The <u>FDA Final Rule on Over the Counter (OTC) Hearing Aids</u> of October 2022 repealed the requirement in 21 CFR 801.421 for a medical evaluation or signed waiver to obtain hearing aids. The federal rule takes precedence over state law but authorizes states to maintain existing state laws or regulations that require the evaluation or waiver.

One section of our NRS (637B.242), and two sections of NAC (637B.0444 and 637B.045) remain in effect, but only apply to the sale of hearing aids by catalog, mail, or Internet, listed below.

The Advisory Committee reviewed the matter in January 2023 and recommended no changes to either the NRS or NAC. However, we have since been informed that AAA recommends states consider removing medical clearance requirements for prescription hearing aids to clear up confusion and remove restrictions.

The matter is brought back for discussion and possible revision recommendations.

NRS 637B.242 Sale of hearing aids by catalog, mail or Internet: Conditions; records; regulations.

- 1. A hearing aid specialist or dispensing audiologist licensed pursuant to this chapter may sell hearing aids by catalog, mail or the Internet if:
  - (a) The hearing aid specialist or dispensing audiologist has received:
    - (1) A written statement signed by:
      - (I) A physician or physician assistant licensed pursuant to <u>chapter 630</u> or <u>633</u> of NRS, an advanced practice registered nurse licensed pursuant to <u>NRS 632.237</u>, an audiologist or a hearing aid specialist which verifies that he or she has performed an otoscopic examination of the person to whom the hearing aid will be sold and the results of the examination indicate that the person may benefit from the use of a hearing aid;
      - (II) A physician or physician assistant licensed pursuant to <u>chapter 630</u> or <u>633</u> of NRS, an audiologist or a hearing aid specialist which verifies that he or she has performed an audiometric examination of the person to whom the hearing aid will be sold and the results of the examination indicate that the person may benefit from the use of a hearing aid; and
      - (III) A dispensing audiologist or a hearing aid specialist which verifies that an ear impression has been taken of the person to whom the hearing aid will be sold; or
    - (2) A waiver of the medical evaluation signed by the person to whom the hearing aid will be sold as authorized pursuant to 21 C.F.R. § 801.421(a)(2); and
  - (b) The person to whom the hearing aid will be sold has signed a statement acknowledging that the hearing aid specialist or dispensing audiologist is selling him or her the hearing aid by catalog, mail or the Internet based upon the information submitted by the person in accordance with this section.
- 2. A hearing aid specialist or dispensing audiologist who sells hearing aids by catalog, mail or the Internet pursuant to this section shall maintain a record of each sale of a hearing aid made pursuant to this section for not less than 5 years.
- 3. The Board may adopt regulations to carry out the provisions of this section, including, without limitation, the information that must be included in each record required to be maintained pursuant to subsection 2.

NAC 637B.0444 Requirements concerning waiver by client of medical evaluation. (NRS 637B.132) If a hearing aid specialist or dispensing audiologist offers a client a waiver of the medical evaluation required by 21 C.F.R. § 801.421, the hearing aid specialist or dispensing audiologist shall:

- 1. Verbally explain the waiver to the client before the client signs the waiver; and
- 2. Provide the written waiver on a form separate from any other form that the client is required to sign.



## Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board Advisory Committee on Fitting and Dispensing Hearing Aids

NAC 637B.045 Preparation and retention of health care records and other records. (NRS 637B.132)

- 1. A speech-language pathologist or audiologist shall prepare and retain health care records for each client he or she treats in accordance with <u>NRS 629.051</u>. As used in this subsection, "health care records" has the meaning ascribed to it in <u>NRS 629.021</u>.
- 2. A hearing aid specialist or dispensing audiologist shall prepare and retain records of fitting, servicing or dispensing a hearing aid for each client he or she treats. The records must be retained for not less than 5 years after the record is prepared and may be created, authenticated and stored in a computer system that limits access to those records or is maintained in any other form which ensures that the records are easily accessible by the hearing aid specialist or dispensing audiologist. Each record must include, without limitation:
  - (a) The name, address, telephone number and date of birth of the client;
  - (b) The medical history of the client as it relates to his or her loss of hearing;
  - (c) The dates on which the hearing aid was delivered, fitted and adjusted, and notations of all procedures performed on such dates, and, if applicable, the date of return or attempted return of the hearing aid;
  - (d) Audiograms of the client;
  - (e) The specifications of the hearing aid, including the serial number of the hearing aid as indicated by the manufacturer of the hearing aid;
  - (f) The settings for the hearing aid;
  - (g) The progress and disposition of the case;
  - (h) A copy of the contract for the sale of the hearing aid; and
  - (i) A copy of any waiver of the medical evaluation required by 21 C.F.R. § 801.421.

**ACTION:** Approve, table, or take no action on the matter.



#### c. Practical Examination Fee Increase: NAC 673B.030

The Board's NRS 637B.175 sets a fee cap of \$300.00 for the examination. The actual fee charged is \$200.00 as established in NAC 673B.030. Notably, this is the only fee that is not already at the maximum cap limit.

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**ATTACHMENT:** None



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      - (II) A physician or physician assistant licensed pursuant to <u>chapter 630</u> or <u>633</u> of NRS, an audiologist or a hearing aid specialist which verifies that he or she has performed an audiometric examination of the person to whom the hearing aid will be sold and the results of the examination indicate that the person may benefit from the use of a hearing aid; and
      - (III) A dispensing audiologist or a hearing aid specialist which verifies that an ear impression has been taken of the person to whom the hearing aid will be sold; or
    - (2) A waiver of the medical evaluation signed by the person to whom the hearing aid will be sold as authorized pursuant to 21 C.F.R. § 801.421(a)(2); and
  - (b) The person to whom the hearing aid will be sold has signed a statement acknowledging that the hearing aid specialist or dispensing audiologist is selling him or her the hearing aid by catalog, mail or the Internet based upon the information submitted by the person in accordance with this section.
- 2. A hearing aid specialist or dispensing audiologist who sells hearing aids by catalog, mail or the Internet pursuant to this section shall maintain a record of each sale of a hearing aid made pursuant to this section for not less than 5 years.
- 3. The Board may adopt regulations to carry out the provisions of this section, including, without limitation, the information that must be included in each record required to be maintained pursuant to subsection 2.

NAC 637B.0444 Requirements concerning waiver by client of medical evaluation. (NRS 637B.132) If a hearing aid specialist or dispensing audiologist offers a client a waiver of the medical evaluation required by 21 C.F.R. § 801.421, the hearing aid specialist or dispensing audiologist shall:

- 1. Verbally explain the waiver to the client before the client signs the waiver; and
- 2. Provide the written waiver on a form separate from any other form that the client is required to sign.



## Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board Advisory Committee on Fitting and Dispensing Hearing Aids

NAC 637B.045 Preparation and retention of health care records and other records. (NRS 637B.132)

- 1. A speech-language pathologist or audiologist shall prepare and retain health care records for each client he or she treats in accordance with <u>NRS 629.051</u>. As used in this subsection, "health care records" has the meaning ascribed to it in <u>NRS 629.021</u>.
- 2. A hearing aid specialist or dispensing audiologist shall prepare and retain records of fitting, servicing or dispensing a hearing aid for each client he or she treats. The records must be retained for not less than 5 years after the record is prepared and may be created, authenticated and stored in a computer system that limits access to those records or is maintained in any other form which ensures that the records are easily accessible by the hearing aid specialist or dispensing audiologist. Each record must include, without limitation:
  - (a) The name, address, telephone number and date of birth of the client;
  - (b) The medical history of the client as it relates to his or her loss of hearing;
  - (c) The dates on which the hearing aid was delivered, fitted and adjusted, and notations of all procedures performed on such dates, and, if applicable, the date of return or attempted return of the hearing aid;
  - (d) Audiograms of the client;
  - (e) The specifications of the hearing aid, including the serial number of the hearing aid as indicated by the manufacturer of the hearing aid;
  - (f) The settings for the hearing aid;
  - (g) The progress and disposition of the case;
  - (h) A copy of the contract for the sale of the hearing aid; and
  - (i) A copy of any waiver of the medical evaluation required by 21 C.F.R. § 801.421.

**ACTION:** Approve, table, or take no action on the matter.



# Review and Recommendation on Guidance for Scope of Practice Related to Earmold Impressions Pursuant to NRS 637B.055(1)

The Board recently received a request for guidance related to making earmold impressions in the scope of practice for fitting and dispensing hearing aids.

NRS 637B.055: "Practice of fitting and dispensing hearing aids" means measuring human hearing and selecting, adapting, distributing or selling hearing aids and includes, without limitation:

- 1. Making impressions for earmolds;
- 2. Administering and interpreting tests of human hearing and middle ear functions;
- 3. Determining whether a person who suffers from impaired hearing would benefit from a hearing aid;
- 4. Selecting and fitting hearing aids;
- 5. Providing assistance to a person after the fitting of a hearing aid;
- 6. Providing services relating to the care and repair of hearing aids;
- 7. Providing supervision and in-service training concerning measuring human hearing and selecting, adapting, distributing or selling hearing aids; and
- 8. Providing referral services for clinical evaluation, rehabilitation and medical treatment of hearing impairment. (Added to NRS by 2015, 2295)

As the NRS language is very limited, the question was specifically raised around the use of the Earlens® Contact Hearing Solution. A physician's instruction guide is attached for reference and explains the following:

- The system uses resonant inductive coupling to transmit and receive sound information from a Processor and Ear Tip to a Tympanic Lens (Lens).
- The Lens is customized for each patient and is placed in to position by a trained physician. It is placed at the end of the ear canal on the skin around the TM.
- The Ear Tip features a vent and can be physically modified by a hearing healthcare professional to improve fit. The cable can be exchanged by a hearing healthcare professional.
- The Earlens® Impression System is used by the physician to collect a deep ear canal impression. The impression is used to manufacture the customized Lens and Ear Tip.
- Only physicians trained in Ear, Nose & Throat procedures should place or remove the Lens.

The Board was contacted by a Dispensing Audiologist working within an ENT practice that is using the Earlens System. The practitioner explained that they currently perform the lateral ear impression, but the ENT performs the medial impression. To help office flow, they requested and received permission from Earlens for the AuD-D to also perform the medial impression, as long as it meets state scope of practice requirements. The procedure is described as "making impressions of the TM and ear canal as well as inserting and removing a lens near (not touching) the TM." The practitioner states they would feel very comfortable doing the procedure and believe it would help the ENT in office, greatly help patients waiting to be seen, and also be a positive step for audiology nationwide.

**ACTION:** Approve, table, or take no action on the matter.

#### **ATTACHMENT(S):**

1. Earlens.® Physician Instructions



# **Earlens® Contact Hearing Solution Physician Instructions**

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#### 1 Introduction

CAREFULLY READ ALL INSTRUCTIONS PRIOR TO USE.

Rx ONLY

For patient instructions, please see Earlens® Contact Hearing Solution Patient Instructions.

For physician instructions, please see Earlens® Contact Hearing Solution Physician Instructions.

#### 2 Earlens® Contact Hearing Solution Device Description

The *Earlens® Contact Hearing Solution* uses resonant inductive coupling to transmit and receive sound information from a Processor and Ear Tip to a Tympanic Lens (Lens). The Earlens® Contact Hearing

Solution includes the following components: *Earlens® Contact Hearing Solution Physician Instructions*.

- Lens
- Processor
- Ear Tip
- Earlens® Fitting Software
- Charger with Power Adapter
- Earlens® Impression System
- Mineral Oil
- Earlens® Control Mobile Application



Figure 1: Earlens component schematic

#### 2.1 Lens

The Lens (Figure 2) is designed to receive electromagnetic energy from the Processor and Ear Tip and convert it into mechanical vibrations of the tympanic membrane (TM). These vibrations are perceived as sound. The Lens is customized for each patient and is placed in to position by a trained physician. It is placed at the end of the ear canal on the skin around the TM.



Figure 2: Lens

#### 2.2 Processor and Ear Tip

The Processor features microphones, a digital signal processor, and a rechargeable battery. The Ear Tip connects directly to the Processor via the cable connector (Figure 3). Sound waves are collected by the microphones on the Processor, converted into electrical signals, and digitally processed. The electrical sound information is converted into an electromagnetic signal that is transmitted by a coil located in the Ear Tip that is received by the Lens.

The Processor also features a wireless antenna that allows for direct connectivity with select smartphones and tablets. The use of this feature is optional. Information on settings and use of the wireless functionality can be found in Section 10 of this IFU. For additional information, please contact your Earlens® support team or visit <a href="www.earlens.com/connectivity">www.earlens.com/connectivity</a>.

The Ear Tip features a vent and can be physically modified by a hearing healthcare professional to improve fit. The cable can be exchanged by a hearing healthcare professional.

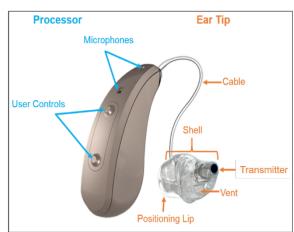


Figure 3: Processor & Ear Tip

#### 2.3 Earlens® Fitting Software

The fitting software is used to program the Processor, enabling the hearing healthcare professional to calibrate and program the Processor specific to the patient's needs.

#### 2.4 Earlens® Charger and Power Adapter

The Charger is designed to recharge the Processor (Figure 4). When connected to the wall power adapter, the Charger houses and charges either one or two Processors simultaneously. An AC wall power adapter is included with the system.

#### 2.5 Earlens® Impression System

The Earlens® Impression System is used by the physician to collect a deep ear canal impression. The impression is used to manufacture the customized Lens and Ear Tip.

#### 2.6 Mineral Oil

White mineral oil (food grade) is used to lubricate the eardrum to keep the Lens in place and functioning properly. To maintain the devices, it is recommended that patients apply one pump of mineral oil to their ears every other day or as recommended by their physician.

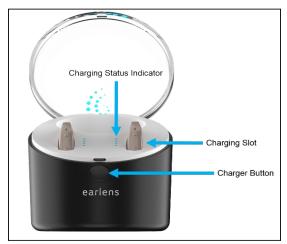


Figure 4: Earlens Charger

#### 3 Indications for Use

The Earlens® Contact Hearing Solution transmits amplified sound by vibrating the eardrum through direct contact. It is indicated for individuals 18 years and older with a mild to severe sensorineural hearing impairment who can benefit from amplification. The device can provide the full spectrum of amplification that includes 125 Hz - 10,000 Hz.

#### 4 Fitting Range

The Earlens® Contact Hearing Solution provides the full spectrum of amplification that includes 125 Hz - 10,000 Hz. The audiometric fitting range is shown in Figure 5.

#### 5 Contraindications

The patient must not have any known or active medical issues that would preclude them from having a hearing device, including:

- a. An abnormal TM (deemed perforated, inflamed or has dimeric or monomeric area, or in any other way abnormal).
- b. An abnormal middle ear or a history of prior middle ear surgery other than tympanostomy tubes.
- c. An ear canal anatomy that prevents the physician from seeing an adequate amount of the TM.
- d. An anatomical configuration of the external auditory canal that prevents satisfactory placement of the Lens.
- e. A history of chronic and recurrent ear infections in the past 24 months.
- f. A rapidly progressive or fluctuating hearing impairment.
- g. Diagnosed with having a compromised immune system which may impact the tissue of the auricle or ear canal, such as keratosis obturans, ichthyosis, eczema of the auricle or ear canal, received radiation of the head at any time, or chemotherapy for cancer within the last six years.

Note: Once the otologic and audiologic indications for use were met, approximately 95% of patients were successfully fit with the Earlens® Contact Hearing Solution (5% were unable to anatomically accommodate the Lens).

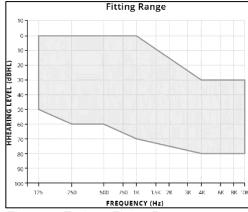


Figure 5: Earlens Fitting Range

#### 6 Warnings



Before using the Earlens® Contact Hearing Solution, make sure you and your patients read and understand each of the following safety warnings:

- The Earlens® Contact Hearing Solution is considered MRI unsafe. The Lens should be removed prior to an MRI exam or MRI exposure. Only physicians trained in Ear, Nose & Throat procedures should place or remove the Lens.
- The patient should not use therapeutic or medical diathermy using electromagnetic radiation (magnetic induction coils or microwave) from the shoulders up with Earlens® Contact Hearing Solution in place.
- Should any part of the Aid become damaged, the patient should discontinue use and contact their hearing healthcare professional.
- If the patient experiences discomfort or pain in their ear, they should contact their ENT physician immediately. Only physicians trained in Ear, Nose & Throat procedures should place or remove the Lens.
- The patient should not insert foreign objects into the ear, such as Q-tips, bobby pins, or fingernails. Insertion of foreign objects could result in pain and damage to the ear, damage to the Lens, or cause it to operate improperly.
- The patient should contact their hearing healthcare professional if they experience discharge from the ear or persistent discomfort or any other problems.
- Should the Processor become unusually warm or hot, the patient should promptly remove it, discontinue use, and contact their hearing healthcare professional.
- Do not crush, short circuit, modify, or disassemble any component of the Earlens® Contact Hearing Solution. Keep all components of the Earlens® Contact Hearing Solution out of the reach of children, pets, and others, to avoid risk of swallowing.
- Do not incinerate any component of the Earlens® Contact Hearing Solution or use near open flame. Handle waste from electronic equipment per local regulations.

#### 7 Precautions



Before using the Earlens® Contact Hearing Solution, make sure you and your patients read and understand each of the following safety precautions.

- This is not hearing protection. The patient should remove this device (Processors and Ear Tips) if they experience overly loud sounds, whether short or long lasting. If the patient is in a loud place, they should use the right kind of hearing protection instead of wearing this device. In general, if the patient would use ear plugs in a loud place, they should remove this device (Processors and Ear Tips) and use ear plugs.
- The sound output should not be uncomfortable or painful. The patient should turn down the volume or remove the device (Processors and Ear Tips) if the sound output is uncomfortably loud or painful. If the patient consistently needs to turn the volume down, the device may need to be further adjusted.
- The patient might need medical help if a piece gets stuck in the ear. If any part of the hearing aid, like the Ear Tip, gets stuck in the patient's ear, and they can't easily remove it with fingers, they should get medical help as soon as they can. The patient should not try to use tweezers or cotton swabs because they can push the part farther into the patient's ear, injuring the eardrum or ear canal, possibly seriously.
- Individuals with known nickel sensitivity/allergy should be informed that the Lens and Ear Tip components contain nickel that is coated with a parylene barrier. If an allergic reaction develops, the Lens and Ear Tip should be promptly removed.
- The Lens and Ear Tip were tested for nickel leaching and found to be compliant and within the safe levels identified in European standard EN1811. Traces of oxidation (discoloration) may be visible on the Lens surface following prolonged wear. Testing indicated the oxidation was not likely to affect the structural integrity of the Lens and Ear Tip within the 1 year expected life.
- Only hearing healthcare professionals trained in the fitting of hearing aids may fit the

- Earlens® Processor and Ear Tip.
- The Earlens® Contact Hearing Solution is custom designed and intended to be used for a single patient.
- The Ear Tip is designed to sit a set distance from the Lens. Sound output may deviate if the Ear Tip is not inserted to the proper depth. If the sound output does deviate, the patient can reposition the Ear Tip until optimal sound output is achieved.
- Earplugs or headphones can be used with the Lens in place as long as care is taken not to over-insert them and they do not protrude deeply into the ear canal.
- The patient may shower, bathe, or swim with the Lens in place. Ear plugs may be used to
  prevent water from entering the ears so long as care is taken to not over-insert them.
   Removing water from ears may be more difficult with the Lens in place.
- If the patient has small or unusually shaped ear canals, they may be at a greater risk for ear canal abrasions, either from the ear impression procedure or from Ear Tip use.
- The patient should avoid getting the Processor wet, as it may damage the device. The patient must remove the Processor and Ear Tip prior to showering, swimming, or bathing.
- The patient may experience a reduction in their hearing levels when the Lens is in place, but the Processor is not activated.
- Do not direct streams of liquid (i.e., isopropyl alcohol, hydrogen peroxide, DeBrox®) into ears, as this may cause the Lens to become dislodged or cause damage to the device.
- Failure to oil the ear canal may result in Lens displacement.
- Do not place any component of the Earlens® Contact Hearing Solution into a microwave, or near a significant source of static electricity.
- Use only the Earlens® Charger and AC wall adapter provided. Although other adapters may look similar, they may cause damage to the Earlens® Contact Hearing Solution.
- Handle the components carefully and prevent hard knocks. Do not drop them as it may damage the Earlens® Contact Hearing Solution.
- If the Earlens® Processor fails to operate or if it appears damaged, including the presence of battery leakage or swelling, the patient should promptly remove the Processor, discontinue use and contact their hearing healthcare professional.
- Only clean the Processor with a soft cloth. Do not use chemicals (i.e., hairspray) in close proximity or to clean the Processor.
- Keep Charger cord out of reach of individuals who may be at risk of strangulation.
- Electromagnetic fields produced by other electrical equipment such as cell phones, metal detectors, microwaves, RFID systems and commercial theft detection systems (also known as electronic article surveillance [EAS]) may interfere with the Earlens® Contact Hearing Solution. In the event that the patient perceives unexpected noise or interference in the presence of the Earlens® Contact Hearing Solution, move away from the source to mitigate the potential interference. If the patient has further concerns, they should remove the Processors and contact their hearing healthcare professional.

#### 8 Clinical Study Results (Information summarized from 2015 Definitive Study)

The Definitive Clinical Study of the Earlens® Contact Hearing Solution confirmed the safety and effectiveness of the Earlens® Contact Hearing Solution for individuals with a mild to severe sensorineural hearing impairment between the frequencies of 125 Hz-10,000 Hz. The prospective, single arm study assessed 48 subjects (96 ears) who wore the fully activated Earlens® Contact Hearing Solution in both ears in their daily lives for four months per the study protocol. Safety and effectiveness were assessed during the four months.

#### 8.1 Study Demographics

The average age of the study population was 69 years with a gender ratio of 60% for males and 40% for females. The subjects were seen across three clinical sites with the largest enrollment at Site 1 (Site 1= 21, Site 2=15 and Site 3=12). All participants were experienced hearing aid users.

#### 8.2 Safety Outcomes

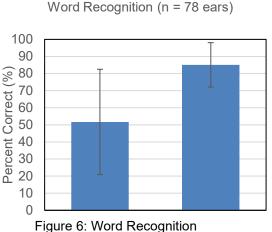
The primary safety endpoint was intended to demonstrate that use of the Earlens® Contact Hearing Solution did not result in a change in residual hearing function. The objective was to identify any change in baseline hearing after four months of device usage using a four-frequency threshold average criterion (500, 1000, 2000, and 4000 Hz, referred to as PTA4). A determination of clinically non-significant hearing threshold change was made if calculated PTA4 hearing change of the subject population was less than 10 dB. After wearing the Lens for 4 months, no decrease in hearing sensitivity of more than 10 dB was observed. A secondary safety endpoint assessed any decrease in hearing sensitivity of >10 dB by subject per ear at each test frequency. After four months of use no subjects exhibited a decrease of >10 dB for either ear at any frequency. In addition, no serious device or procedure-related adverse events were reported during the trial. There were 31 adverse events reported in 20 subjects for 22 ears. All but one of the adverse events were temporary and resolved. One subject report of a 'fullness' sensation when wearing the Earlens® Contact Hearing Solution did not change during the trial and effectiveness outcomes were not impacted. The subject continued use throughout the study period of four months. Table 1 presents the adverse events by type, frequency of occurrence and resolution status at the conclusion of the study.

Adverse Event Category	Number Occurring	Serious AE	Status
Abrasion/blood blister in ear canal	17	No	Resolved
Ear discomfort/pain	5	No	Resolved
Inflammation/granulation tissue on tympanic membrane	3	No	Resolved
Abrasion/blood blister on tympanic membrane	2	No	Resolved
Ear tip-related: ear canal swelling, itching, etc.	2	No	Resolved
Pain upon eructation & valsalva	1	No	Resolved
Sensation of fullness	1	No	Ongoing

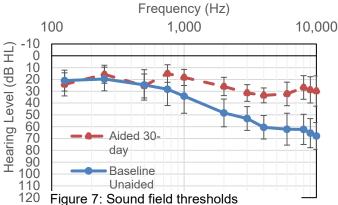
Table 1: Adverse events across study period

#### 8.3 Effectiveness Outcomes

The primary efficacy endpoint was intended to demonstrate device effectiveness by improving speech recognition using the Northwestern Auditory Test No.6 (NU-6) test of word recognition with the Earlens® Contact Hearing Solution at a speech level of 45 dB HL. The objective was to show that the Earlens® Contact Hearing Solution provides a statistically significant improvement in mean aided word recognition at 30 days post placement when compared to the baseline unaided condition measured prior to



1



Sound field Threshholds (n = 78 ears)

placement. The average baseline unaided score was 52% and the average aided score was 85% (Figure 6); this improvement was statistically significant (p<0.0001). A secondary measure of device effectiveness was defined as more than 10 dB improvement (functional gain) in thresholds over the range of frequencies from 2,000 to 10,000 Hz for aided thresholds measured at 30 days post placement when compared to unaided thresholds measured prior to placement. Mean functional gain was 30.5 dB (p<0.0001), indicating that the Earlens® Contact Hearing Solution was able to deliver significant functional gain (Figure 7). Functional gain reached a maximum of 68 dB at 9-10 kHz.

An additional measure of device effectiveness was perceived benefit as measured by the Abbreviated Profile of Hearing Aid Benefit (APHAB). The average baseline unaided percentage of communication difficulties was 58% (standard deviation = 16%), the percentage of difficulties decreased to 30% (standard deviation = 13%) with the subject's own air conduction hearing aid, and for Earlens it was 29% (standard deviation = 14%). 92% of subjects completing the study (35 out of 38) perceived a clinically significant improvement for Earlens relative to unaided as measured by APHAB.

#### 8.4 Temporary TM Damping

The Lens is designed to remain in place even when the Processor is not worn. When the Processor is removed (while swimming, bathing, or sleeping), users may experience TM damping, which would be interpreted as slight reduction of sound, due to the loading effect of the Lens. The effect on PTA (500 Hz, 1000 Hz and 2000 Hz) averaged 4 dB, which is immediately reversed when the Lens is removed. When the Processor is in place, the gain delivered by the Earlens® Contact Hearing Solution more than overcomes the TM damping effect.

#### 8.5 Summary of Extended Study

The safety and effectiveness of the Earlens® Contact Hearing Solution was monitored beyond the 4 months of the Definitive Study. In the Extended Study, 24 subjects (48 ears) opted to continue wearing the Earlens® Contact Hearing Solution after completing the Definitive study. At the conclusion of the Extended Study, 33 ears had at least 12 months of cumulative Lens wear with no change in unaided air conduction hearing thresholds under earphones. Of the 24 active subjects in the Extended Wear Study, 11 related adverse events (AEs) AEs were experienced by 8 subjects in 10 ears. All events were temporary and resolved. Nine of 11 AEs were related to ear cleaning pre-impression (3 AEs), the impression procedure (4 AEs), or the inspection process pre-impression (2 AE). Two of the related AEs were attributed to Ear Tip fit and both were resolved after Ear Tip modification. One subject continues to report a sensation of fullness.

Driven on the results of the Definitive study, the Earlens® Contact Hearing Solution has been shown to be safe and effective in delivering the full spectrum of amplification from 125Hz to 10,000Hz.

#### 9 Operating Instructions

#### 9.1 Ear Canal Impression

Before making the ear canal impression using the Earlens® Impression System, please read and follow the precautions and procedures found in the Earlens® Sitting Hybrid Impression Instructions for Use.

#### 9.2 Lens Placement

- a. Visually inspect the Lens packaging. DO NOT use if there is any visible damage.
- b. Explain to the patient that the ear will be inspected and cleaned, then lubricated with oil (which may cause some sensations of stuffiness), and the device will be inserted. Instruct the patient to remain still during the procedure.

- c. With the patient in the supine position, use a binocular microscope to inspect the external auditory canal and the tympanic membrane and determine if there are any contraindications for Lens placement.
- d. Remove all cerumen and epithelial debris from the ear canal, anterior sulcus and tympanic membrane using the usual office instrumentation and small cotton swabs with mineral oil. If there is any bleeding or development of contraindications as a result of cleaning of the ear canal, do not place Lens.
- e. Lubricate the ear canal and TM with mineral oil.
- Read the package label to confirm that the device is for the correct patient and ear. The right device is identified by a red dot located in the center, underneath the Grasping Tab (Figure 8). The left device is identified by a blue dot located in the center, underneath the Grasping Tab (Figure 9).
- g. Grasp the Lens at the Grasping Tab (Figure 2) using smooth alligator forceps.
- h. Using alligator forceps, gently advance the Lens through a thin bladed nasal speculum to the medial region of the ear canal.
- Then, using an aural speculum and curved pick, gently advance the Lens onto the TM and position it such that the Perimeter Platform is congruent with the anatomical contours of the patient's anatomical counterparts. At this point the Umbo platform will be in direct contact with the TM.
- Once satisfactory positioning is achieved, remove the speculum.

#### 9.3 Lens Removal

- a. Explain to the patient that the ear will be inspected and cleaned, lubricated with mineral oil (which may cause some sensations of stuffiness), and the device will be gently removed. Instruct the patient to remain still during the procedure.
- b. With the patient in the supine position use a binocular microscope to inspect the external auditory canal and the TM, and determine the position of the device and the location of the grasping tab.
- c. Lubricate the ear canal with mineral oil.
- d. Using a right angle hook, use the Grasping Tab to capture the device to be removed and slowly deliver it into the lateral canal. Withdraw the speculum, and use the curved pick to remove the
- e. Inspect the external auditory canal and the TM.

#### Cleaning and Preparing the Lens for Reinsertion

If a Lens is removed the device and canal must be cleaned prior to reinsertion of the device.

- a. Remove the Lens per the Lens Removal instructions and carefully place and submerge the device in a dish of mineral oil for soaking.
- b. Thoroughly clean the ear canal, anterior sulcus and TM using cotton swabs, mineral oil and suction as needed. Remove any debris, including epithelial tissue that may have built up in the anterior sulcus or on the TM.
  - Hydrogen peroxide solution can be used to loosen hard epithelium or cerumen adhered to the TM or anterior sulcus. Before placement of the Lens ensure all of the hydrogen peroxide is completely suctioned out, and the applied area is cleaned with mineral oil, to avoid device contact with the hydrogen peroxide solution.
- c. Inspect the umbo of the TM and the area where the Perimeter Platform of the Lens was resting to ensure it is free of debris or epithelial tissue.
- d. Following the ear canal cleaning carefully inspect the Lens to ensure it is free of debris and is not damaged. Replacing a Lens that is not free of debris or is damaged may cause the device to
- e. Proceed with device placement per the Lens Placement (Section 9.2) operating instructions.

#### Troubleshooting

The expected life for the Lens is one year. The Lens is expected to exhibit the same failure modes regardless of the duration of wear. The Lens can become displaced from the tympanic membrane,

Figure 8: Right Lens

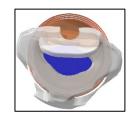


Figure 9: Left Lens

blocked by debris or degrade over time. This may cause the sound output of the Earlens® Contact Hearing Solution to cease, become reduced or become intermittent. Perform the following troubleshooting steps to assess Lens function:

- a. Inspect the ear canal and Lens. If the Lens is blocked by debris, carefully clean the ear canal. If removal or reinsertion is required, follow *Lens Removal* and *Cleaning and Preparing Lens for Reinsertion* instructions above.
- b. Inspect the position of the Lens on ear. If the perimeter platform does not appear to be in contact with the wall of the ear canal, the Lens may be displaced.
  - I. In the event of displacement of the Lens, remove the device per *Lens Removal* instructions and replace following the *Cleaning and Preparing Lens for Reinsertion* operating instructions.
- c. Inspect the appearance of the Lens on ear. If the Lens appears damaged or abnormal, remove using the *Lens Removal* instructions and contact Earlens.
- d. If there is a suspected performance issue with the Lens that otherwise appears fine visually (e.g. significant elevation of system Calibration), remove the device per *Lens Removal* instructions and replace following the *Cleaning and Preparing Lens for Reinsertion* operating instructions. Once Lens is replaced assess if the suspected performance issue is resolved (e.g. system Calibration is no longer elevated).

If after performing the troubleshooting steps listed above, the Lens still does not function, remove it using the *Lens Removal* operating instructions and contact Earlens.

#### 9.6 Care & Maintenance

- a. Store the Earlens® Contact Hearing Solution in a clean, dry location out of direct sunlight.
- b. The expected life of the Lens is one year. As for any patient with a hearing assist device, it is recommended that the patient return annually to their hearing healthcare professional(s) to monitor their audiologic and otologic status.

#### 10 Operating Specifications

- For technical details about the Earlens® Contact Hearing Solution and compliance to applicable standards, please consult the Hearing healthcare professional Instructions for Use.
- Certain components of the Earlens® Contact Hearing Solution, including the Processor and the Ear Tip are classified as a Type BF applied parts as described in the international standard IEC 60601-1:2005, Medical Electrical Equipment-Part 1: General Requirements for Basic Safety and Essential Performance.
- Expected useful life of the Earlens® Contact Hearing Solution include:
  - o Processor and Charger- one year
  - Ear Tip- one year
  - o Lens- one year
- The Earlens® Contact Hearing Solution is designed for continuous use.
- The Processor is not designed to prevent the ingress of water.

#### 10.1 Power Requirements

Battery Charger Input	100-240 VAC, 50-60 Hz, 0.2A
Battery Charger Output	5.0 VDC, 1.0A

#### 10.2 Operating and Storage Conditions

Operating	5°C- 40°C	Storage Conditions	-20°C to 50°C
Conditions	15-93% humidity	and Temperature	Maximum relative humidity
	700 – 1060 hPa	Limit*	of 93% non-condensing.
Use conditions	Avoid high temperatures and sustained exposure to direct sunlight.	Frequency range	100 Hz to 10,000 Hz

\* If the system is stored at a temperature below room temperature, allow the system to stabilize at room temperature for a minimum of 1 hour before use.

10.3 FCC Information FCC ID: 2AGDU-EL2PIN

Earlens Contact Hearing Solution complies with part 15 of the FCC rules and ICES-003 of the IC rules. Operation is subject to the following two conditions:

- (1) This device may not cause harmful interference, and
- (2) This device must accept any interference received, including interference that may cause undesired operation.

**CAUTION:** Changes or modifications not expressly approved by Earlens Corporation for compliance could void the user's authority to operate the equipment.

**NOTE:** Earlens Contact Hearing Solution has been tested and found to comply with the limits for a Class B digital device, pursuant to part 15 of the FCC Rules. These limits are designed to provide reasonable protection against harmful interference in a residential installation. This equipment generates, uses and can radiate radio frequency energy and, if not installed and used in accordance with the instructions, may cause harmful interference to radio communications. However, there is no guarantee that interference will not occur in a particular installation. If this equipment does cause harmful interference to radio or television reception, which can be determined by turning the equipment off and on, the user is encouraged to try to correct the interference by one or more of the following measures:

- Reorient or relocate the receiving antenna.
- Increase the separation between the equipment and receiver.
- Connect the equipment into an outlet on a circuit different from that to which the receiver is connected.
- Consult the dealer or an experienced radio/TV technician for help.
  - Earlens Contact Hearing Solution complies with part 18 of the FCC rules.

#### 11 Glossary of Terms

TM	Tympanic Membrane
Lens	Tympanic Lens
EAS	Electronic Article Surveillance
AE	Adverse Event

12 Graphic Symbols Contained in Device Labeling

Symbol	Description	Reference	Symbol	Description	Reference
earlens.com/ifu	Refer to instruction manual/booklet	IEC 60601- 1:2005 ISO 7010- M002	X	Temperature limit	ISO 15223- 1:2021, 5.3.7
earlens.com/ifu	Consult Instructions for Use	ISO 15223- 1:2021, 5.4.3	9	Atmospheric pressure limitation	ISO 15223- 1:2021, 5.3.9

Ť	Keep Dry	ISO 15223- 1:2021, 5.3.4	IP22	Ingress Protection Code signifying protection against solid foreign objects of 12.5mm Ø and greater, and protection against vertically falling water drops when enclosure tilted up to 15°.	IEC 60601- 1:2005 IEC 60529, 4.2
RxOnly	Caution: Federal law restricts this device to sale by or on the order of a (licensed healthcare practitioner)	FDA Final Rule 81 FR 38911	IP57	Ingress Protection Code signifying protection against dust and the effects of temporary immersion in water.	IEC 60601- 1:2005 IEC 60529, 4.2
<b>2</b>	Humidity limitation	ISO 15223- 1:2021, 5.3.8	SN	Serial number	ISO 15223- 1:2021,5.1.7
<b>((☆))</b>	Non-ionizing radiation	IEC 60601-1- 2:2014 IEC 60417- 5140 (2003- 04)	$\triangle$	Caution	ISO 15223- 1:2016, 5.4.4
LOT	Batch code	ISO 15223- 1:2021, 5.1.5	MR	MR unsafe	ASTM F2503- 13
REF	Catalog number	ISO 15223- 1:2021, 5.1.6	(e)	FCC Part 18 Declaration of Conformity	FCC Guidelines for Labeling, Part 15 and Part 18, 2014
~~ <u></u>	Date of manufacture	ISO 15223- 1:2021, 5.1.3	☆	Type BF applied part	IEC 60601- 1:2005 IEC 60417- 5333



Manufacturer (Ref. ISO 15223-1:2021, 5.1.1): Earlens Corporation Menlo Park, CA 94025

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# Reports from Committee Chair and Members

- a. Report from Committee Chair and Board Members
- b. Next Meeting: Wednesday, January 17, 2024 at 4:30pm
- c. Future Agenda Items

**ACTION:** Approve, table, or take no action on the matter.

ATTACHMENT(S): None.



## **Public Comment**

No vote may be taken upon a matter raised during a period devoted to public comment until the matter itself has been specifically included on an agenda as an item upon which action may be taken. (NRS 241.020)

**ACTION:** Informational only. **ATTACHMENT(S):** None.



# Adjournment

**ACTION:** Meeting adjourned.

ATTACHMENT(S): None.