

Assemblymember Cecelia González, Sponsor Assemblymember Tracy Brown-May, Co-Sponsor

Assembly Bill 177 revises NRS Chapter 637B on behalf of the Nevada Speech Language-Pathology, Audiology and Hearing Aid Dispensing Board, addressing licensing and practice rules for all three practitioner types regulated by the Board and several administrative sections within the chapter. These revisions further the Board's mission by:

- Increasing consumer access to safe, high quality healthcare provided by skilled practitioners;
- Expanding licensing eligibility, reciprocity, & portability while maintaining rigorous licensing standards;
- Reducing barriers to timely and efficient issuance of licenses;
- Expanding scopes of practice to align with federal law and/or nationally accepted best practice standards; and
- Removing unnecessary, outdated, or obsolete rules and references.

Practice Area	Revision	Increases Patient Access to Care	Eliminates Licensing Barriers	Increases Reciprocity & Portability	Expands Scope of Practice	Aligns with Federal Law	Recognizes National Standards	Removes Unneeded Rules
Speech- Language Pathology	New speech-language pathology assistant licensing.	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark	
	Scope of practice expansion to address oral & nasal endoscopy.	\checkmark			\checkmark			
Audiology	Elimination of hearing aid examinations & endorsement.	\checkmark	\checkmark	\checkmark			\checkmark	\checkmark
Hearing Aid Fitting & Dispensing	Scopes of practice alignment with OTC Hearing Aids.	\checkmark	\checkmark	\checkmark			\checkmark	\checkmark
	Scope of practice expansion to address tinnitus & cerumen.	\checkmark			\checkmark	\checkmark	\checkmark	\checkmark
	NBC-HIS certification optional instead of required	\checkmark			\checkmark			
General	Streamlined License by Endorsement procedures.		\checkmark	\checkmark				\checkmark
	Alignment of licensing & applicability sections.		\checkmark	\checkmark				
Fee Cap Increase	Increased caps for actual fees in <u>NAC 637B.030</u> . While not a focal point of the bill, all actual fees are at maximum caps except one. No fee increases are planned but if necessary, would mitigate rising operating costs.							

Licensing: Speech-Language Pathology

Section 9 & Related: 2-7, & 18

- Regulation of SLP Assistants is widespread nationally with 38 states either licensing, registering, or certifying SLPAs.
- As of 12/31/24, there were 1,409 SLPs holding a Nevada license, resulting in just 45 SLPs per 100,000 Nevadans. Nevada licensees total 1,106, representing 11 counties, with 1,025 residing in Clark and Washoe.
- At least 10 other Nevada Boards license assistants, including affiliated fields such as physical & occupational therapy.
- This revision was developed in collaboration with the Nevada Department of Education, which will sunset its use of Bachelor's level SLP personnel in 2026 and pursue a new SLP Assistant path to align with this Board's SLPA license. The applicability revision in Section 18 closes the loop on the historical exception for school-based personnel.
- The Board has approved proposed revisions to NAC 637B to establish detailed regulations addressing SLPA licensing, clinical training, scope of practice, and supervision requirements following passage of this bill.

Licensing: Audiology

Section 39 & Related: 17, 19, 20, 23, 27, 31, 32, 33

- Audiologists wishing to fit & dispense hearing aids must pass both a written and practical dispensing exam and pay an additional fee to add the dispensing endorsement to the Standard license.
- As of 2023, only 12 other states required separate endorsement, 9 other states required a written exam, and 4 other states required a practical exam. The Audiology & Speech-Language Pathology Interstate Compact (ASLP-IC) now has 34 member states and does not require exams or a separate endorsement.
- Combined exam fees exceed \$400, and the practical exam requires travel to Nevada with portable audiometric equipment and a second person to sit as a test subject. Nevada is the only state offering exams on an individual basis and research found no third-party proctor/company available to administer the practical exam outside Nevada.
- Exam data indicates an 81% average passing rate on the written exam among Nevada audiologists and hearing aid specialists, and 96% of audiologists have passed the practical exam on the first attempt.
- Limited exceptions include a <u>Temporary license</u>, acceptance of a written exam score within the preceding 24 months, or a waiver for those seeking reinstatement or re-licensure of a prior Nevada license under certain criteria.

Licensing: Hearing Aid Specialists

- <u>NBC-HIS Certification</u> is only required for a HAS license in Nevada and Utah, and NBC-HIS has advised that this certification is not appropriate as an entry-level requirement. Certification includes verification of at least 2 years of fitting & dispensing experience, mirroring the Board's HAS Apprentice training requirements.
- Nationally, HAS training requirements vary significantly, and in recognition of this, the Board has approved moving forward with proposed revisions to NAC 637B following passage of this bill to require 1 year of training/licensure for an applicant holding an out-of-state license or having completed training and experience in another state.

Scope of Practice Speech-Language Pathology

Clarifies the allowable use of a wide variety of oral & nasal endoscopic methods including the <u>Flexible Endoscopic Evaluation</u> of <u>Swallowing (FEES) Procedure</u>.

Scope of Practice: Audiology

- Broadens "cochlear implants" to "implantable hearing devices" to encompass evolving technology.
- Removes physician's request/order as Audiologists may diagnose independently, including under <u>Medicaid</u>, and as orders are typically related to authorization & billing.
- Revises per the FDA Final Rule on OTC Hearing Aids, referenced below.

Scope of Practice: Fitting & Dispensing Hearing Aids

- Aligns with the <u>FDA Final Rule</u> on Over the Counter (OTC) Hearing Aids, under which OTC hearing aids do not require the involvement of a licensed person, and non-OTC hearing aids are now defined as "prescription" devices, still subject to <u>21</u>
 <u>C.F.R. § 800.30</u> & <u>.422</u>. Despite no changes to prescribing authority, states have received guidance to clarify scopes of practice using "ordering the use of" language. The requirement to obtain a medical evaluation or signed waiver to obtain either category of hearing aids was also repealed in the Final Rule. [Related Sections: 13, 14, 32, 34]
- Tinnitus Care & Certification added as recommended by the <u>International Hearing Society</u>. The use of hearing aids for tinnitus masking & treatment is different from fitting for hearing loss, requiring counseling beyond the initial fitting. The IHS <u>Tinnitus Care Provider Certificate</u> is earned during a 3-day training & skills assessment. Nationally, only <u>North Carolina</u> currently addresses tinnitus care, and current legislation in <u>Nebraska</u> also seeks to clarify that hearing instrument specialists may remove cerumen and provide tinnitus care. [Related Sections: 8 & 11]
- Cerumen Management added as recommended by the International Hearing Society (IHS) whose <u>Position Statement on</u> <u>the Practice of Hearing Aid Dispensing</u> includes cerumen management in its scope of practice for Hearing Aid Specialists. Four states currently address cerumen management: <u>North Carolina</u>, <u>South Dakota</u>, <u>Tennessee</u>, & <u>Wisconsin</u>, and current legislation in <u>Nebraska</u> also seeks to clarify that hearing instrument specialists may remove cerumen and provide tinnitus care. The Board has approved proposed revisions to NAC 637B modeled after <u>Tennessee</u> to establish detailed regulations for this practice following passage of this bill.

Section 24

Section 14

Section 15

Section 16