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STATE OF NEVADA

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**DEPARTMENT OF BUSINESS AND INDUSTRY
OFFICE OF NEVADA BOARDS, COMMISSIONS AND COUNCILS STANDARDS
NEVADA SPEECH-LANGUAGE PATHOLOGY, AUDIOLOGY
AND HEARING AID DISPENSING BOARD**

NOTICE OF PUBLIC MEETING

Tuesday, April 22, 2025 ~ 5:00pm

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

<https://www.nvspeechhearing.org/about/Minutes.asp>

Teleconference Access

ZOOM VIDEO & AUDIO:

<https://us02web.zoom.us/j/82267641355?pwd=l4EQf42Kcf1FKyqAs3lgghRRSASWzz.1>

AUDIO ONLY BY TELEPHONE: (669) 900-6833

Meeting ID: 822 6764 1355 **Passcode:** 199822

If you are outside the United States or need **toll-free telephone access**, please contact the Board office at board@nvspeechhearing.org or (775) 787-3421 to request a toll-free number no later than 3:00pm Pacific on the day of the meeting.

Public Comment

Any person wishing to make public comment may attend the meeting and provide comment as follows:

- 1) In person at the physical location(s) listed above, 2) Virtually through the Zoom teleconference video link listed above, or 3) Telephonically through the Zoom telephone number listed above. Please see additional public comment instructions at the end of this agenda.

AGENDA

The **STATE OF 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 Board 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. Approval of the Minutes: Board Meeting of March 26, 2025** *(for possible action)*
- 4. Welcome New Member, Election of Board Chair & Vice Chair, and Appointment of Board Bank Signatories and Financial Reviewer** *(for possible action)*
- 5. Disciplinary Matters: Consent Decree Recommended for Approval: Case #S25-01, Aamna Ahmad, License #SP-3999** *(for possible action)*
- 6. Legislative Update with Consideration of AB177, Board Position and/or Recommendation on Legislative Bills, and Preparation for Board Visit to Nevada Legislature** *(for possible action)*
- 7. Consideration and Approval of Proposed Revisions to NAC 637B in Preparation for Public Workshop During 2025-2026 Interim** *(for possible action)*
- 8. Executive Director's Report**
 - a. Licensure Statistics *(for possible action)*
 - b. FY25 Q3 Financial Report *(for possible action)*
 - c. Board Member Appointments/Reappointments & New Board Member Welcome *(for possible action)*
 - d. Complaints *(for possible action)*
- 9. Review and Approval of Revised FY25 Budget and Proposed FY26 Budget** *(for possible action)*
- 10. Report from Legal Counsel** *(informational only)*
- 11. Reports from Board Chair and Members**
 - a. Report from Board Chair and Board Members *(for possible action)*
 - b. 2025 Proposed Meeting Schedule: *(for possible action)*
 - 1) Wednesday, July 16, 2025 at 4:30pm to include Public Workshop on proposed revisions to NAC 637B. Teleconference hosted via Zoom and in-person at the Reno Board Office. *(for possible action)*
 - 2) Wednesday, October 15, 2025 at 4:30pm to include Public Hearing on proposed revisions to NAC 637B. Teleconference hosted via Zoom and in-person at the Reno Board Office. *(for possible action)*
 - c. Future Agenda Items *(for possible action)*
 - 1) Summary of 2025 Legislative Session and Impact on/Follow Up Required by the Board *(for possible action)*
 - 2) Public Workshop on Proposed Revisions to NAC 637B *(for possible action)*
 - 3) Public Hearing on Proposed Revisions to NAC 637B *(for possible action)*
 - 4) New Board Member Welcome *(for possible action)*
 - 5) Review & Approval to Revise FY26 Budget As Needed *(for possible action)*
 - 6) Other Items As Proposed *(for possible action)*

12. 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)

13. Adjournment *(for possible action)*

PUBLIC COMMENT

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. (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 board@nvspeechhearing.org 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 [Website](#) and Office, 6170 Mae Anne Avenue, Suite 1, Reno, Nevada 89523
- State of Nevada Public Notices Website: www.notice.nv.gov

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 <https://www.nvspeechhearing.org/about/Minutes.asp> or by contacting Jennifer R. Pierce, Executive Director by phone at (775) 787-3421 or email at board@nvspeechhearing.org. Anyone desiring additional information regarding the meeting is invited to call the Board office at (775) 787-3421 or board@nvspeechhearing.org.



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

AGENDA ITEM 1

Call to Order, Confirmation of Quorum

Call to Order, Confirmation of Quorum.

Action: Meeting Called to Order



State of Nevada

Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board

AGENDA ITEM 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).

CHAIR/VICE 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:

1. 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 at the end of the meeting agenda with additional public comment instructions.

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: None – Informational Only



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

AGENDA ITEM 3

Approval of the Minutes: Board Meeting of March 26, 2025

The minutes of the Board Meeting of March 26, 2025 are presented for approval.

Attachment on next page: *Minutes Not Yet Approved 2025 3 26.*

Action: Approve, Table, or Take No Action on the Matter



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

MINUTES OF PUBLIC MEETING

Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board

Board Meeting
March 26, 2025

Members Present:	Timothy Hunsaker, Lynee Anderson, Shawn Binn, Jennifer Joy-Cornejo, Branden Murphy, Adrienne Williams
Members Absent:	Vacant SLP
Staff Present:	Jennifer Pierce, Executive Director Stacey Whittaker, Licensing Coordinator Henna Rasul, Sr. Deputy Attorney General, Board Counsel Izack Tenorio, Board Lobbyist
Public Present:	Katie Allen, Nanci Campbell, William Fox, Lance Greer, Rhett Hepler, Nancy Kuhles, Kim Reddig, Christine Seitz (IHS), Alicia Spoor, Amanda West

Call to Order, Confirmation of Quorum

Vice Chair Hunsaker called the meeting to order at 4:34pm. A roll call confirmed a quorum was present.

Public Comment

Vice Chair Hunsaker introduced the agenda item and read the following instructions for a member of the general public to call in to the meeting and provide public comment, pursuant to NRS 241.023(5):

"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: 1. 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."

Vice Chair Hunsaker further advised that public comment would also be taken for each matter in agenda item 4, and advised those with public comment specific to agenda item 4 could provide comment at that time. Vice Chair Hunsaker then called for public comment. Two members of the public indicated that they had public comment to give on agenda item 4 and would wait until those items were reached. There was no other public comment.

Minutes have not yet been approved and are subject to revision at the next meeting.

Approval of the Minutes: Board Meeting of January 22, 2025

Vice Chair Hunsaker asked if there were any corrections or revisions to the minutes of the meeting of January 22, 2025 and none were noted. Adrienne Williams made a motion to approve the minutes as written and Shawn Binn seconded the motion, which passed unanimously.

Consideration of Proposed Amendments to AB177 and Delegation of Future Revisions to Board Chair & Executive Director

Vice Chair Hunsaker introduced this item and summarized the activity and response to the Board's bill, AB177, as introduced and heard in the Assembly Committee on Commerce & Labor on Monday, February 24, 2025. Several sections within the bill have been met with opposition and are included in this agenda item for the Board to consider public comment and potential amendments to the bill.

a. SLP Assistants & Exclusions to Chapter: Sections 9 & 18

Vice Chair Hunsaker introduced this item and summarized the opposition to the bill draft, specifically Section 18 which removes the exemption from the chapter for anyone holding the Nevada Department of Education (NDE) endorsement to teach pupils with speech-language disorders. Most of the opposition has centered on NDE's regulation change taking effect October 1, 2026 to require a master's degree to obtain endorsement, but current NDE endorsement holders in the Clark County School District who hold a bachelor's degree and post-baccalaureate training will be allowed to remain in their current roles. These professionals do not currently qualify for a license with this Board, but would be required to obtain an SLP Assistant license from this Board under the current version of Section 18.

Executive Director Pierce directed the Board to two amendment options originally included in this packet, and a third option that was emailed to the Board and posted online two days prior to this meeting. The new, third option retains the exclusion language in Section 18 with a revision to clarify that it would only apply to those not licensed with the Board and holding NDE endorsement issued on or before September 30, 2026. The Clark County Education Association has expressed strong opposition to the current bill, but indicated it would be neutral if the bill is amended using this option. Vice Chair Hunsaker called for discussion and there was consensus among members that the third option would be an appropriate compromise to recognize the intent of NDE's regulation and allow the bill to move forward.

Vice Chair Hunsaker called for public comment on this item and the following public comment was heard, which has been summarized/edited from the Zoom closed captioning transcript:

- *Kim Reddig:* "So I just wanted to state for the record, I was on the subcommittee that collaborated and constructed the language for this assembly bill over six sessions that were open meetings with agendas, minutes approved and posted. What's really hard to kind of swallow as a subcommittee member is that we worked on this language with consistent collaboration with the Board of Examiners from January 2024 through January 2025 when the Board approved the language that's now part of this assembly bill. During that year, with subcommittee members taking feedback, considering different practice setting perspectives, and agreeing on the best language for Nevada, there wasn't a lot of input or involvement from SLPs currently working in Nevada schools. When the Assembly bill was presented, that was a very different story. I'm curious as to why those professionals didn't choose to get involved before. We met for a year. We talked a lot about it. All of that stuff came up at lots of meetings going on. I think what's best for Nevada children is to have qualified speech and language providers, which is speech-language pathologists and SLPAs. Bachelor's providers have been and continue to be filling a gap in Nevada as school-based SLPs. As needs for communication services for children increase, it is more important than ever that we expect these qualified speech and language practitioners to be

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providing the services. This may mean that school districts need to consider compensation that meets needs of outside providers, right? As qualified Medicaid health professionals that are eligible for reimbursed services, this should be really important to everybody that we're actual qualified providers and not people that are filling gaps. As the ASHA Co-Seal, something that's been challenging about this situation is that in June 2023, the sunset date was put on the regulation allowing those bachelor's level providers in collaboration with Nevada Department of Education. The last data that was collected by the NSHA Coalition in 2023 showed 50% of the providers in Clark County were bachelor's degree providers, and Washoe County had 10%. Since that regulation changed in 2023, Washoe County is down to close to 4%, but Clark County remains at 50%. So Washoe County has realized that, yes, we have to start hiring these more qualified practitioners and Clark County continues to backfill with those bachelor's level people. It's hard because there's also NSU, which is our new master's level program down in Las Vegas that is turning those bachelor's level people into master's level providers. They are providing the education so that we can meet the gap and meet those needs, in addition to online programs. So there are lots of opportunities for those bachelor's providers to gain their master's degree. It's a little curious to me as to why they're not meeting the same needs. The SLPA license is the next logical step following the sunset of those providers. This targets a shortage area that we all know exists in our state and it ensures that those people that are providing services are qualified, trained, and maintain continuing education related to this field. I think what's challenging about some of those bachelor's providers is they have the same name. And I think that's the last really challenging piece. Is that these people are called SLPs in the school, even though they only have a bachelor's. And so I think that really is my biggest sticking point is that maybe we work with NDE, CCEA, whoever it is, to really designate that those bachelor's level providers are called something different than SLPs because my master's degree really is something different than those bachelor's level providers. Thank you."

- Nancy Kuhles: "Dear Vice Chair Hunsaker and Executive Director Pierce, members of the Nevada Speech-Language Pathology and Hearing Aid Dispensing Board. For the record, my name is Nancy Kuhles. I am a speech-language pathologist licensed by the Nevada Speech-Language Pathology, Audiology and Hearing Aid Dispensing Board, and I hold the Nevada Department of Education retiree professional license. For the record, I am a member of the Nevada Speech-Language Pathology and Audiology Hearing Aid Dispensing Board SLP Subcommittee, and I worked on AB177. For the record, I'm representing myself and providing this public comment in my role as a practitioner. My public comment addresses agenda item number 4A. I'm in support of AB177 and the following proposed amendments and additions for consideration. Option two, Section 18, as drafted in AB177, and that's item on page 10 of the materials packet that you have. Option three, and this was the additional materials packet Section 9, that includes eligibility clarification for optional assistant license if NDE licensee with a current endorsement issued on or before September 30, 2026 wishes to practice elsewhere as an SLP Assistant. Section 9, item 1B, an addition for the Board to consider. So you have it in blue. I'm going to read B as it currently stands with the blue. And the blue is what was added for this additional piece, right, Jennifer? 'A current endorsement On or before September 30th of 2026 by the Department of Education pursuant to NRS 391.019 and any regulations adopted pursuant thereto, which allows a person to teach pupils who have speech and language impairments. And provide speech-language pathology services in accordance with their current licensed professional personnel classification in the public which they are employed.' I would like the Board to consider adding 'a current endorsement issued on or before September 30, 2026 by the Department of Education pursuant to NRS 391.019 and any regulations adopted pursuant thereto, which allows a person to teach pupils who have speech and language impairments.' Per the 2022-2020 data collected by the NSHA Coalition to Address Personnel Shortages (and I sent Jennifer the data table and it was attached in that), there were 82 bachelor's level only speech-language therapists working in Nevada school districts and charter schools other than Clark County School District. This addition would allow current

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endorsement holders who may not be currently employed by a public school or state charter school the opportunity to pursue and obtain an SLP Assistant license issued by our Nevada Speech-Language Pathology, Audiology and Hearing Aid Dispensing Board. Also, I respectfully ask the Board to consider approval of a waiver of the initial application and licensing fees for current NDE license holders who hold an endorsement to teach pupils who have speech and language impairments who wish to pursue and obtain an SLP Assistant license issued by the Nevada Speech-Language Pathology, Audiology and Hearing Aid Dispensing Board. I totally understand a timeframe limit on this waiver of this initial application licensing fee would be completely acceptable. Thank you for concerns.”

- *Amanda West:* “Yes, so I am, I'm a CCSD employee. I hold my NDE license and I also have my CCC's. And I'm one of the people that is just admittedly getting more involved in this. There was some confusion I would say with my colleagues in that things were communicated with the NAC through our district that we kind of all thought things were set in stone and then we're all just kind of figuring out all of this. I will say that I will be more involved in the future. My concerns with this, I understand that we have to compromise. I do agree with everyone who has said that we need a differentiation in title. One thing that I will say with that is I'm also a Medicaid supervisor in CCSD, and there are some conflicting things in the ASHA Code of Ethics that make it difficult. Because it's difficult, our bachelor level therapists who I love, I respect, I know we need them. But they have different education levels and they do not answer to a licensing board. So they are not following a code of ethics like we are. Many, and this is not to insult any of them, I have so much respect and we really need them. But then as, and I realize it's a choice for me to be a Medicaid supervisor but it's tough. It's putting me in a tough position. And not even having that differentiation in title is tough. I understand the concern with waiving the fees. I am also one of those people, I am going on nearly 20 years of practice and I'm on the bachelor level pay scale. Most of the people with bachelor degrees in CCSD get paid more than me. So I'm a little mixed on the option of a waiver. I do like that it would maybe provoke people getting it but that that idea of the cost, I'm looking at it and like, wow, we're paying ASHA dues, we're paying for our state license. So those are some concerns I have. And I know I'm getting involved late in the game, but wanted to be here to voice the concerns of myself and some of my colleagues and that is not meant to degrade any of the bachelor level people I work with, but those are my main concerns with or with the having them answer to some kind of code of ethics and differentiation in title.”

There was additional discussion around Ms. Kuhles' suggestion to waive fees, and Executive Director Pierce explained that this idea came up because the original language would require licensure for all NDE endorsement holders. A later agenda item will address another amendment to provide authority for the Board to waive fees. Ms. Kuhles also clarified that any waiver should be time-limited.

Vice Chair Hunsaker called for a motion and Adrienne Williams motioned to approve an amendment to Assembly Bill 177 per the third option presented, which revises license eligibility in Section 9 and retains exclusion from the chapter for NDE-endorsement holders not also holding a Board license in Section 18. Branden Murphy seconded the motion, which passed unanimously.

b. Cerumen Management in HAS Scope of Practice: Section 15

Vice Chair Hunsaker introduced this item and summarized the opposition to the bill language as drafted in Section 15 which proposed adding cerumen management to the scope of practice for fitting and dispensing hearing aids/hearing aid specialists. Opposition cited concerns of risk to patients due to hearing aid specialists' minimal education and training in this area, despite the intent to follow the bill with regulations modeled after language used in Tennessee to strictly outline the practice.

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Executive Director Pierce directed the Board to the meeting packet which outlined a number of possible amendment options for consideration in addition to any suggested during the meeting. Options included leaving the section as drafted, or amending the bill in any of the following ways: add a reference to planned regulation language that would prescribe the practice; add this language directly into the bill; delete the section from the bill; add a requirement to hold NBC-HIS certification to engage in the practice; or add language requiring supervision by a licensed audiologist or physician to engage in the practice.

Vice Chair Hunsaker called for discussion and Jennifer Joy-Cornejo reiterated her opposition to the matter from an earlier vote, citing safety risks to patients, citing examples of harm caused from the procedure even in medical settings, and disputing access issues for patients. Shawn Binn concurred that the procedures can include many risks even when performed by medical professionals.

Vice Chair Hunsaker called for public comment on this item and the following public comment was heard, which has been summarized/edited from the Zoom closed captioning transcript:

- Christine Seitz, International Hearing Society:* “My comments were about for B, C, and D, if that's okay. It talks about tinnitus and what have you. I just want to, again, appreciate this opportunity to speak in support of the bill and to speak to agenda items for B, C, and D. The bill is a crucial step towards improving continuity of care and access to quality and safe Caring Health Care for Nevada residents by clarifying key issues of cerumen removal and tinnitus care within an HAS scope of practice. And removing barriers to entry into the field. We applaud the Board for being at the forefront of providing continuous safe hearing health care by joining Wisconsin and South Dakota, who recently authorized the removal, as well as Tennessee and North Carolina. And North Carolina does have tinnitus language in their statute. HAS’ adhere to high standards and support rigorous education requirements to ensure they provide safe and effective care. Now, without the ability to remove cerumen, HAS’ are impeded in their scope of practice and their ability to effectively and efficiently serve the citizens of Nevada. Cerumen typically found in the outer ear of the internal ear canal can block the receiver of a hearing aid, leading to diminished amplification, reduced sound quality, unwanted feedback, or even resulting in failure of the hearing aid itself. Additionally, cerumen can cause moisture damage to the internal components of the hearing aid, compromising their longevity. And it can also interfere with the hearing exams by blocking the ear canal and it can also obstruct the creation of the proper ear mold impression which are essential for comfortable and effective hearing aids that fit correctly. Hearing aid specialists are integral members of the hearing healthcare team because they are often the frontline professionals who can identify, assess, and manage the auditory aspects of tinnitus, particularly when the condition is related to hearing loss. Many individuals with tinnitus also experience some degree of hearing loss and noise induced hearing loss. A well-trained hearing aid specialist should be able to perform extended high frequency audiometric along with audio acoustic emissions tests to identify cochlear damage, which is often the cause of subjective tinnitus. Hearing aid specialists play a critical role in identifying managing tinnitus within the broader hearing healthcare team. It's not in the patient's best interest to prohibit a licensed HAS from just discussing and treating tinnitus. And the correlation between it and hearing loss and cognitive difficulties. It's widely accepted that HAS’ can perform evaluations or measurement of the powers, a range of human hearing, and based on the evaluation recommendations select hearing aids to improve hearing ability. If an HAS is authorized to assess the hearing loss, conduct tests to determine its nature and degree, and recommend and fit hearing aids and adjust them, then it seems to be maybe contradictory and unnecessarily to restrict or prevent them from offering tinnitus treatment devices. Restrictions and barriers to the ability of tentative treatment devices hamper their ability to serve the patients effectively, given they already, again, like I said, select and adopt hearing aids.

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The restrictions are unsupported by evidence and would unjustifiably prevent individuals with tinnitus and hearing loss from maintaining the relief that they seek. Many people with hearing loss are reluctant to seek help and imposing a medically unsupported obstacle the treatment contradicts the public interest. In both cerumen and complex tinnitus care, the hearing aid specialists are trained to refer if they encounter issues beyond their scope of practice. They are trained to refer their patient to an ENT as soon as possible. And clarifying that they can remove cerumen and tinnitus, again, will streamline the care process and the hearing aid delivery system., free up valuable time for primary care physicians and ENTs and what have you. So one of the concerns that is usually brought up on this issue is education and the requirements to become an HAS and that is to receive a passing score on the written and practical exams. The ILE is developed and tested regularly with cytometric practices continuously updating it and reviewing it. The practical exam is hands-on with stations for them to learn. Again, we just wanted to respectfully thank you for your support, and we are comfortable with the amendment options in four and six. And that just concludes it. And I am thankful again for being here and am happy to answer any questions.”

- Nanci Campbell, AUD:* “I just want to thank the Board for letting me speak. I wanted to disclose that I am an audiologist practicing in Nevada. And I also am a former member of the Nevada Advisory Committee on fitting and dispensing hearing aids and I currently still proctor exams for candidates for licensure. I'm also speaking on behalf of the Academy of Doctors of Audiology. And I'd like to just give this statement, if it's all right with you guys. The ADA and its member audiologists strongly oppose provisions within AB 177 that would authorize hearing instrument specialists to perform cerumen management and tinnitus treatment services while simultaneously reducing the licensure requirements. It also ties their training to tinnitus to an online program owned and operated by the International Hearing Society posing an unmanageable conflict of interest that decimates consumer protections. These provisions, if enacted, pose significant risks to public health and safety by allowing individuals without appropriate training, education, and expertise to perform complex medical procedures. I think enough has been said about the cerumen management, so I'm going to skip over that part again. I feel like the dangers are obvious and that I'm not going to duplicate stating what everyone else has about that. I feel like the tinnitus can be a symptom of other medical conditions such as tumors, vascular disorders, medication side effects, and the evaluation and management of this really requires a multidisciplinary approach involving physicians, audiologists, and mental health professionals. Patients that have tinnitus are particularly vulnerable because this condition is frequently associated with depression, other mental health conditions, anxiety, and unremitting tinnitus is known to have resulted in suicide. Allowing hearing instrument specialists to perform both of these services independently without the extensive post-secondary education and clinical training commensurate with audiologists, physicians, and other healthcare providers would lower the standard of care and would increase risks to Nevada's residents. Moreover, AB177's proposal to make the certification by the NBC-IHS optional further erodes critical consumer protections, even for existing services. A high school diploma, limited on-the-job training, and online correspondence training program are not sufficient training to deliver complex audiologic services. And these provisions are really incongruent with the consumer protections that the statute is supposed to uphold. The ADA respectfully recommends that AB177 be amended to remove these provisions authorizing hearing instrument specialists to perform cerumen management and tinnitus treatment. Alternatively, at a minimum, the bill should require hearing instrument specialists to complete at least two years of post-secondary education in hearing sciences from an accredited institution and work under the supervision of an audiologist or physician when performing these services. In closing, we urge the Board to consider the public safety implications of AB177 and to adopt and promote amendments that preserve essential consumer protections. The Academy of

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Doctors of Audiology remains committed to working with you and our Nevada members to ensure that evidence-based, high-quality hearing and balanced health care remains accessible and safe for all Nevadans. Thank you for your time and your consideration.”

- Alicia Spoor, AUD:* “For the record, my name is Alicia Spore. I'm actually a practicing audiologist and the legislative chair of the Maryland Academy of Audiology. So I appreciate the time that you're allowing because as you know, when one state changes something, it can create a trickle effect in other states. So I wanted to bring a couple issues to light, both that I've heard today as well as that we've seen around the country. It's interesting that you're talking about how medical assistants who are often responsible by a medical provider, a physician of some kind are not doing well with cerumen removal and that in the state of Maryland, the hearing aid dispensers have relatively equal education and training as those medical assistants, which I feel like I've heard some board members say you would not want people to clean their ears. In contrast, in the state of Maryland a hearing aid dispenser must have an accredited two-year post-secondary program from a college or university in the United States whose program has been accredited by a national accrediting association recognized by the Council for Higher Education Accreditation or the United States Department of Education. So we have worked very hard to remove any type of secular type of training or education on the job training from a national association. We want to make sure that there is kind of a more similar embedded process from a third party system. The Board, because this question is very similar to what has happened in Nevada in the last three years, the Board had been asked back in 2015-2016 about hearing aid specialists, who again, have an associate's degree in the state of Maryland as to whether or not they could do certain tasks. And the Board and council clearly stated that hearing aid dispensers cannot test pediatric patients, work with prescription hearing aids with pediatric patients, do tinnitus testing, evaluation, counseling, management, device fitting, troubleshooting, programming, follow-up oral rehabilitation or rehabilitation of adults or children, admittance testing (which is a middle ear system, not a cochlear damage system, but a middle ear system) a cochlear implant evaluation, remove cerumen from the external auditory canal, or remove a foreign body from an external auditory canal. And again, these are people who have one of the highest levels of education in the country for those hearing aid dispensers. I would like to kind of give an analogy, which I've given to the Department of Labor. The audiology practice act, at least in Maryland, does not say that I cannot do pressure equalization tube surgery. I've been trained in it. I've had some clinical experience watching my ENT colleagues do it. But if I'm not doing that type of procedure as an apprentice when I was a clinical student. How am I going to know how to do that when I'm licensed? So if the Board doesn't say that I cannot do it, does that mean audiologists can remove that barrier of sending a patient to the ENT to have pressure equalization tubes in when they're doing the diagnostic admittance testing and noting that there is fluid behind the ear? It is a different level of analogy, but it is the same type of analogy. Clinical doctor to medical degree. Hearing aid dispensing certification to a clinical type of doctor or physician assistant or physician doing cerumen and tinnitus management. Last but not least, I'd like to point out that when we talk about lack of providers and this was a very big issue, both in Nebraska last year as well as some other states. I would strongly encourage you to look at a heat map because I hear what you're saying about wanting more providers and we all know there's a healthcare crisis in terms of providers. But as a Board, the safety of your public is more important than how many healthcare providers you have. That being said, when Nebraska was going through this last year and they pulled out a heat map, all of the hearing aid dispensers were in the same area as those audiologists. I don't know Nevada as well, but I would strongly encourage you to look at that to make sure that those patients are getting the services in those rural areas. And this just isn't allowing somebody to do something that they're not trained clinically or didactically for. So thank you for your time and allowing me to attend.

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- Lance Greer:* "I'm a practicing audiologist in Southern Nevada and rural Southern Nevada, part of Clark County but still considered rural, but nonetheless I don't know that I could have stated anything better than Dr. Spoor and the others regarding negative opinion regarding this bill. I guess the one thing that I would like to add that maybe hasn't been touched on is the fact that I'm troubled on behalf of my patients who are consumers. That number one, this program, so to speak, that they're being credentialed through IHS presents a conflict of interest in my opinion but as you click on the website program overview, which is right on their website in terms of what this program is going to do, it gives an "about the program" with three bullet points. The three bullet points are, 'boost your competitive advantage', 'grow your client base', and of course, the third, which I mean, which I appreciate, 'advance your education'. I mean we all appreciate advancing our education but two-thirds of the objectives seems to be a monetary reason. I mean, I've been practicing in the state of Nevada for 25 years and it's just you kind of see these things come and go. And even though it's well intended you get with IHS, whose sole, I don't want to say sole, but a majority of their income comes from hearing aid sales it's an effort to legitimize their marketing to just solely drive hearing aid sales without regard to the perhaps the public interest and perhaps their lack of knowledge. Again, is what's been stated in having apprenticed and done it right through a two-year program or whatever, and I'll just kind of conclude with this. Again, just this last week, I saw a patient who I had seen originally last July, who had come in having asymmetric hearing loss and speech discrimination on the worse side was a little bit suppressed. At the time I had recommended that she go in and get an MRI. As I've thought about this whole issue, I guess I just wonder, would an HAS whose sole source of income is through a hearing aid sale versus being able to bill an insurance to at least maybe recoup a little bit for their time, how many would have been swayed to just said, well, this is just one of those little anomalies and had pushed forward to fit the hearing aid I mean, who knows what the answer to that is but I've reflected on it. Anyway, in my case, I referred her back to her doctor, recommended MRI, she didn't end up following through immediately, but she then eventually began to notice some changes. She came back in, like I said, last week with her MRI results, which again clearly showed a space occupying mass. I retested her hearing again just this last week and what had been maybe a 35 or 40% drop in hearing was now completely gone. So I guess I just, you know, again, I mean, I can appreciate the access to care, to health care because of the lack of numbers. But to me, that's not the sole basis that this decision should be on. I mean, it's to the safety and care of the patients of the state. So anyway, I appreciate the time to at least voice my opposition to the bill. If there were provisions like what has been mentioned, a two-year university degree, apprenticeship, doing these things under a practicing audiologist and/or an Ear Nose and Throat group or a medical professional that can render that training, that speaks to a different story. But I think by just opening it up to any willy nilly HAS practitioner with just a degree that's not a degree, but just an online course provided by the organization that's, you know, that's kind of got their backs to me is short-sighted. So thank you.

Board members weighed in with the options they would be comfortable approving, with most citing amending the bill to remove the practice altogether as their first choice, or requiring the supervision of a licensed audiologist or physician or NBC-HIS certification as alternate choices.

Vice Chair Hunsaker noted that another licensed audiologist was on the call but had not spoken and asked & allowed additional public comment:

- Rhett Hepler:* "I just kind of feel like I mean, as audiologists, we've gone to school and got our degrees, and why should we allow the hearing aid dispensers to widen their scope of practice when they haven't paid the price get their education, get trained on how to do it? And I just, I kind of feel like at that point, why should we even get our AUD degree? I mean, you can do basically everything else the

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audiologist can do, like why not make them sacrifice, go to school, get the degree, and get trained. And to protect the patient, you know? That's my opinion. That's all I have to say."

Vice Chair Hunsaker called for a motion and Jennifer Joy-Cornejo motioned to approve an amendment to Assembly Bill 177 per the second option presented, which would delete cerumen management from the scope of practice for fitting & dispensing hearing aids as originally drafted in section 15 of AB 177.

Adrienne Williams seconded the motion, which passed, but not unanimously, as Timothy Hunsaker and Lynee Anderson voted against.

c. Tinnitus Care in HAS Scope of Practice: Sections 15 & 11

Vice Chair Hunsaker introduced the item and noted that the discussion in the last agenda item regarding cerumen management included references to similar concerns regarding tinnitus care. Vice Chair Hunsaker called for discussion and public comment and there was none.

Vice Chair Hunsaker called for a motion, and Shawn Binn motioned to approve an amendment to Assembly Bill 177 to delete tinnitus care from the scope of practice for fitting & dispensing hearing aids as originally drafted in sections 15 and 11 of AB 177. Jennifer Joy-Cornejo seconded the motion, which passed unanimously.

d. NBC-HIS Removal from HAS Licensing Requirements: Sections 24 & 25

Vice Chair Hunsaker introduced the item and called for discussion. Lynee Anderson noted that HAS applicants already must pass both written and practical dispensing examinations, and the examination required to earn NBC-HIS certification is redundant in many ways. Vice Chair Hunsaker called for public comment and there was none.

Vice Chair Hunsaker made a motion to retain sections 24 and 25 as originally drafted in AB177 to remove the requirement for a HAS applicant to hold certification from NBC-HIS. Jennifer Joy-Cornejo seconded the motion, which passed unanimously.

e. Fees: Section 22 with Revision to Military Discount and Authority to Waive Licensing Fees

Vice Chair Hunsaker introduced the item, and Executive Director Pierce explained the proposed amendments, including revision to allow a 50% military discount on initial application & licensing fees for any applicant, including a Gold Star family member, rather than just those applying for Expedited License by Endorsement pursuant to NRS 637B.203 which is limited to standard audiology & speech-language pathology licenses. The proposed revision also provides authority for the Board to waive all or part of a licensing or examination fee. Ms. Pierce reminded the Board of the earlier discussion regarding fees for NDE staff who may wish to seek obtain an SLP Assistant license, and stated that future meeting agenda items may include consideration for this, as well as revisions to the actual fees charged in NAC 637B, which may include lower fees for new licenses and renewals for SLP Assistants and HAS Apprentices, as is common among other Boards that license trainees and support personnel.

Vice Chair Hunsaker made a motion to approve an amendment to Assembly Bill 177 to incorporate revisions to this section to expand the military discount to any military-affiliated applicant or Gold Star Family member, and add authority for the Board to waive fees. Adrienne Williams seconded the motion, which passed unanimously.

f. Delegation to Approve Future Revisions to AB177 to Board Chair & Executive Director

Vice Chair Hunsaker introduced the item noting that as the legislative session progresses, additional amendments to AB 177 may be proposed and rather than calling a formal Board meeting, the Board

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may delegate authority to himself and Executive Director Pierce to approve these. Vice Chair Hunsaker and Ms. Pierce clarified that this would only apply to minor changes or language revisions, but not amendments that would conflict with the Board's prior actions, which would be brought back to the whole Board. Discussion resulted in consensus that members were comfortable with delegating this authority, and Vice Chair Hunsaker called for a motion. Branden Murphy made a motion to delegate authority to approve future minor amendments to Assembly Bill 177, and Shawn Binn seconded the motion, which passed unanimously.

Update On & Consideration for Board Position on Legislative Bills

Executive Director Pierce directed the Board to the list of tracked legislation that may impact the Bill if passed. There was no discussion and no action was taken.

Reports from Board Chair and Board Members

There were no reports from the Board Chair or members. Executive Director Pierce summarized the plan for the April 22, 2025 Board Meeting and visit by the Board to the Legislature in Carson City the following day, and advised that more information would be sent out in advance of that meeting.

Public Comment

There was no public comment.

Adjournment

Vice Chair Hunsaker adjourned the meeting at 6:38pm.



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AGENDA ITEM 4

Welcome New Member, Election of Board Chair & Vice Chair, and Appointment of Board Bank Signatories and Financial Reviewer

Tim Hunsaker is the Vice Chair and has been serving as the Acting Chair since Andrea Menicucci termed off the Board, but is also scheduled to term off in July 2025. Tim has indicated that he is willing to stay on and serve until his seat is filled, but it's unclear when that may occur and how it may also be impacted if SB78 passes. Additionally, Tim, Andrea Menicucci, and Jennifer Pierce are the current banking signatories, so it would be of benefit to add at least one additional signer. Adrienne Williams is the current financial reviewer but should be replaced if she moves into the Chair or Vice Chair role.

This agenda item was added to allow further discussion on how to proceed and allow the Board to take action as deemed appropriate.

a. Welcome New Board Member

As of the date this packet was disseminated, no appointment has been made to fill the SLP seat vacated by Andrea Menicucci. If no appointment is received before the meeting, parts of this agenda item may still be considered.

Action: Approve, Table, or Take No Action on the Matter

b. Election of Board Chair & Vice Chair

Pursuant to NRS 637B.120, the Board is to elect a Chair and Vice Chair who serve at the pleasure of the Board. The Chair and Vice Chair are voting members of the Board. Board members will be invited to volunteer or nominate members for either position during this meeting, and an election vote will be held.

Duties of the Chair

The Chair presides over all public meetings of the Board:

- Decides if a quorum is present before the meeting is opened;
- Leads the Board members into discussion and attempts to have all sides presented;
- Sets ground rules for time allocation, discussion limits, adjournment, and keeps focus on the agenda;
- Has the agenda adopted at the start of the meeting and ensures motions are properly voted upon;
- Conducts hearings and may be called upon to make evidentiary rulings pursuant to legal obligations.

Characteristics of a Good Chair

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



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Duties of the Vice Chair

The Vice Chair assumes the duties of the Chair in the absence of the Chair. The Vice Chair will assume the Chair position for the balance of the term/year, if for any reason the Chair is unable to continue in the position, such as long-term illness or resignation from the Board.

Action: Approve, Table, or Take No Action on the Matter

c. Banking Signatories

The Board holds operating checking, savings, and Visa credit accounts at Wells Fargo Bank, and current signatories are Andrea Menicucci, Timothy Hunsaker, and Executive Director Jennifer Pierce.

Action: Approve, Table, or Take No Action on the Matter

d. Financial Reviewer

Adrienne Williams is the current financial reviewer, but should she be elected as Board Chair or Vice Chair, it is recommended that another member of the Board be appointed.

Any member may serve in this role, which consists of receiving monthly documentation of Board financial transactions, i.e. bank statements, receipts and disbursements, examining the documents for discrepancies, and approving/signing off on the accounts payable report.

Action: Approve, Table, or Take No Action on the Matter



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AGENDA ITEM 5

Consent Decree Recommended for Approval: Case #S25-01 Aamna Ahmad, License #SP-3999

The complaint alleges failure to notify the Board of an incident within the 10 days required pursuant to NAC 637B.042(15)b). After investigation and review of all documentation received in regard to the above referenced complaint, it was determined that there was sufficient evidence to file a formal complaint for hearing before the Board and the facts set forth in the accusations were sufficient to establish a violation of Chapter 637B of the Nevada Revised Statutes or the Nevada Administrative Code. The practitioner opted to settle the matter by entering into a Consent Decree which is presented to the Board for review and recommended for approval.

The matter must remain confidential until it is heard by the Board and the Consent Decree is approved/accepted, at which time it becomes a public record and will be reported to the State as required.

The attachment listed below will be provided to Board members under separate cover and should not be opened until this item is addressed during the Board meeting.

Attachment: *Consent Decree Case S25-01* – **TO BE PROVIDED/SENT VIA EMAIL DURING MEETING**

Action: Approve, Table, or Take No Action on the Matter



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Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board

AGENDA ITEM 6

Legislative Update with Consideration of AB177, Board Position and/or Recommendation on Legislative Bills, and Preparation for Board Visit to Nevada Legislature

We are tracking a number of bills that may directly impact the Board if passed, as well as related indirectly to other boards or related topics. The Board may also opt to take a position of support, opposition, or neutral on any bill.

Friday, April 11, 2025 was the first session deadline where bills “failed” if not passed out of the first house committee, which included a number of bills we are tracking as noted in the list. Session deadlines are listed below, and AB177 will need to be voted out of the full Assembly by at least a 2/3 majority by Tuesday, April 22. We are also still awaiting the official amendment from LCB and will disseminate via email once received.

Introduction & First Reading 1st House	Introduction & First Reading; assigned, printed, and delivered to a Committee.
Friday, April 11th First Committee Passage	<ul style="list-style-type: none">Hearing: Committee hearing; recommendations/amendments may be made.Work Session: Voted on by Committee. If passed, moves on to the body. Fails if not passed by deadline.
Tuesday, April 22nd First House Passage	<ul style="list-style-type: none">If “Do Pass” by Committee: Second Reading and placed on General File for debate and final vote; ORIf “Amend and Do Pass” by Committee: Second Reading & proposed amendments presented to the body; if the amendment is adopted, bill is reprinted; Third Reading, debate, and vote. If passed by the body, goes to the second house & follows the same steps. Fails if not passed by deadline.
Introduction & First Reading 2nd House	Same as first house.
Friday, May 16th Second Committee Passage	Same as first house Committee.
Friday, May 23rd Second House Passage	Same as first house. *House of origin must agree with any amendments made in the second house. If both houses agree, the bill is adopted; if not, the bill fails.
Monday, June 2nd	End of Session
Governor’s Action	<ul style="list-style-type: none">Governor’s action to 1) sign the bill into law, 2) allow it to become law without a signature (does not act within timeframes below), or 3) veto.Deadlines for action: 5 days (excluding Sunday) if legislature is in session; or 10 days (excluding Sunday) if not in session or fewer than 5 session days left.Passed bills are effective Oct 1st unless otherwise specified in the bill.

Attachment: 2025 Relevant Legislation Revised 4/15/2025

Action: Approve, Table, or Take No Action on the Matter

Bill	BDR	Impact	Keyword(s)	Summary	Requestor	Committee	Last Action	1st House Committee	1st House Passage
AB177	54-199	DIRECT	Board Bill	Makes various changes relating to the Speech-Language Pathology, Audiology and Hearing Aid Dispensing Board.	Assemblymember González	Assembly Commerce & Labor	Amend, Do Pass	4/4/2025	
AB56	54-255	INDIRECT	Licensing: Medical Board	Revises provisions relating to the licensing of certain providers of health care. (licensing)	Board of Medical Examiners	Assembly Commerce & Labor	Amend, Do Pass	4/2/2025	
AB60	39-434	INDIRECT	Licensing: Peer Recovery	Revises provisions relating to peer recovery support services.	Northern Regional Behavioral Health Policy Board	Assembly Health & Human Services	Amend, Do Pass	3/21/2025	
AB64	19-445	DIRECT	Open Meeting Law	Revises provisions relating to public meetings.	Attorney General	Assembly Government Affairs	Amend, Do Pass	4/8/2025	
AB106	54-233	INDIRECT	OT Compact	Enacts the Occupational Therapy Licensure Compact.	Assemblymember Marzola	Assembly Commerce & Labor	Amend, Do Pass	4/11/2025	
AB125	18-909	DIRECT	Open Meeting Law	Revises provisions relating to public meetings.	Assemblymember Flanagan	Assembly Government Affairs	Do pass	3/31/2025	
AB127	S-396	INDIRECT	Language Access Plans	Makes an appropriation to the Office for New Americans in the Office of the Gov to provide grants to counties and cities to implement language access plans.	Committee on Ways and Means	Assembly Ways and Means	None to date	Exempt from deadline	
AB128	19-400	DIRECT	Public Records	Revises provisions relating to public records.	Joint Interim Standing Committee on Government Affairs	Assembly Government Affairs	Amend, Do Pass	4/9/2025	
AB163	54-129	INDIRECT	Licensing: Counseling Compact	Revises provisions governing health care. (Counseling Compact)	Assemblymember Hafen	Assembly Commerce & Labor	Do pass	3/17/2025	
AB169	57-735	INDIRECT	SLP Insurance Coverage	Revises provisions relating to insurance for speech-language pathology services.	Assemblymember Yeager	Assembly Commerce & Labor	Amend, Do Pass	3/31/2025	
AB183	54-151	INDIRECT	Licensing: Optometry	Revises provisions relating to optometry. (licensing)	Assemblymember Koenig	Assembly Commerce & Labor	Amend, Do Pass	3/28/2025	
AB186	54-344	INDIRECT	Licensing: Pharmacy	Revises provisions relating to health care. (pharmacy)	Assemblymember Orentlicher	Assembly Commerce & Labor	Amend, Do Pass	4/11/2025	
AB196	54-164	INDIRECT	Licensing: Psychology	Revises provisions governing psychology.(licensing)	Assemblymember Backus	Assembly Commerce & Labor	Do pass	3/19/2025	
AB230	54-568	DIRECT	Compact: Speech/Hearing	Enacts the Audiology and Speech-Language Pathology Interstate Compact.	Assemblymember Marzola	Assembly Commerce & Labor	Do Pass	3/17/2025	
AB247	19-574	DIRECT	Public Meeting Accomodations for Persons with Disabilities	Revising provisions relating to the accommodation of persons with physical disabilities at certain public meetings.	Assemblymember Brown-May	Assembly Government Affairs	Amend, Do Pass	4/3/2025	
AB248	54-566	INDIRECT	Compact: Physical Therapy	Enacts the Physical Therapy Licensure Compact.	Assemblymember Marzola	Assembly Commerce & Labor	Do Pass	3/14/2025	
AB249	17-932	DIRECT	Fiscal Notes	Revises provisions governing fiscal notes.	Assembly Committee on Ways and Means	Assembly Leg Operations	Amend, Do Pass	3/25/2025	
AB264	19-926	DIRECT	Criminal History Judicial Review of Licens	Revises provisions relating to occupational licensing.	Assemblymember Miller	Assembly Government Affairs	Amend, Do Pass	4/3/2025	

AB106	54-233	INDIRECT	OT Compact	Enacts the Occupational Therapy Licensure Compact.	Assemblymember Marzola	Assembly Commerce & Labor	Amend, Do Pass	4/11/2025	
AB269	18-618	INDIRECT	Tuition Repayment for Counselors in Schools	Revises provisions relating to education.	Assemblymember D'Silva	Assembly Government Affairs	Amend, Do Pass	3/21/2025	
AB270	54-773	INDIRECT	Licensing: Engineers	Revises provisions relating to professional engineers and land surveyors.	Assemblymember Hafen	Assembly Commerce & Labor	Amend, Do Pass	3/19/2025	
AB321	14-1015	DIRECT	Licensing: Second Chance Licensing	Requires regulatory body to recognize a certificate of second chance as removing disqualification of person with a criminal hx from obtaining a license.	Assemblymember Jackson	Assembly Judiciary	Amend, Do Pass	4/10/2025	
AB371	54-835	INDIRECT	Licensing: Cosmetology Compact	Enacts the Cosmetology Licensure Compact.	Assemblymember Torres-Fossett	Assembly Commerce & Labor	Do Pass	3/24/2025	
AB450	54-335	INDIRECT	Licensing: LBE for Marriage & Family Therapists and Clinical Professional Counselors	Revises provisions relating to providers of health care.	Assemblymember Marzola	Assembly Commerce & Labor	Amend, Do Pass	4/2/2025	
AB483	40-354	DIRECT	Licensing & Reporting: Priority Licensing & Reporting for Licensees in Historically Underserved Communities	Establishes priority review for certain applicants for licensure to practice health professions.	Joint Interim Standing Committee on Health and Human Services (NRS 218E.320)	Joint Interim Standing Committee on Health and Human Services (NRS 218E.320)	Do Pass	4/11/2025	
AB484	40-806	DIRECT	Reporting: Requires Reporting on Licensees per NRS 439A.116	Revises provisions relating to health care.	Assembly Committee on Health and Human Services	Assembly Health and Human Services	Do Pass	4/7/2025	
AB510	54-695	INDIRECT	Licensing: Accountants	Makes various changes to the regulation of accountancy.	Assembly Committee on Commerce and Labor	Assembly Committee on Commerce and Labor	Do Pass	3/31/2025	4/14/2025
AB511	57-697	INDIRECT	Insurance: Chiropractic Physicians	Revises provisions relating to chiropractic physicians.	Assembly Committee on Commerce and Labor	Assembly Committee on Commerce and Labor	Do Pass	4/11/2025	
AB513	54-630	INDIRECT	Licensing: Chiropractic	Makes various changes to provisions relating to the Chiropractic Physicians' Board of Nevada.	Assembly Committee on Commerce and Labor	Assembly Committee on Commerce and Labor	Amend, Do Pass	4/11/2025	
AB516	38-348	INDIRECT	Medicaid: School-Based	Makes revisions relating to Medicaid.	Joint Interim Standing Committee on Health and Human Services	Joint Interim Standing Committee on Health and Human Services (NRS 218E.320)	Amend, Do Pass	4/11/2025	
AB519	40-805	INDIRECT	Licensing: Personal Care	Revises provisions relating to personal care.	Assembly Committee on Health and Human Services	Assembly Committee on Health and Human Services	Amend, Do Pass	4/11/2025	
SB78	18-301	DIRECT	Board Consolidation & Oversight by Business & Industry	Revises provisions relating to boards and commissions.	Department of Business and Industry	Senate Government Affairs	Amend, Do Pass	4/11/2025	
SB124	54-38	INDIRECT	Licensing: Medical Board	Revises provisions relating to health care.	Senator Doñate	Senate Commerce & Labor	Amend, Do Pass	4/10/2025	
SB189	54-69	INDIRECT	Licensing: Genetic Counselors	Revises provisions governing health care.	Senator Lange	Senate Commerce & Labor	Amend, Do Pass	3/24/2025	
SB274	18-973	DIRECT	Admin: Submit Vacancy Lists; Removes Pre-Determination Reporting	Revises provisions governing state boards and commissions.	Legislative Commission	Senate Government Affairs	Amend, Do Pass	4/11/2025	
SB294	54-965	INDIRECT	Licensing: Physician Assistants	Revises provisions relating to physician assistants.	Senator Flores	Senate Commerce & Labor	Amend, Do Pass	4/10/2025	
SB340	18-1008	INDIRECT	Admin: Leg Commission May Nullify Adopted Regulations	Revises provisions relating to governmental administration.	Senator Daly	Senate Government Affairs	Amend, Do Pass	4/11/2025	
SB348	40-123	INDIRECT	Licensing: Genetic Counselors	Revises provisions relating to newborn screening.	Senator Pazina	Senate Health & Human Services	Amend, Do Pass	4/8/2025	

AB106	54-233	INDIRECT	OT Compact	Enacts the Occupational Therapy Licensure Compact.	Assemblymember Marzola	Assembly Commerce & Labor	Amend, Do Pass	4/11/2025
SB352	57-712	DIRECT	Admin: Prohibits Discrimination & Boards May Adopt as Grounds	Section 9 Authorizes board to adopt regulations prescribing specific types of discrimination prohibited; and (2) discipline for violations.	Senator Scheible	Senate Commerce & Labor	Amend, Do Pass	4/2/2025
SB358	19-759	DIRECT	Requirements for Payments Accepted	Revises provisions relating to business licenses.	Senator Taylor	Senate Government Affairs	Amend, Do Pass	4/11/2025
SB386	54-891	INDIRECT	Licensing: Massage	Revises provisions relating to health care.	Senator Scheible	Senate Commerce & Labor	Amend, Do Pass	4/10/2025
SB425	40-353	INDIRECT	Board Consolidation & Oversight by DPBH	Creates "Board of Behavioral Health Professionals" in DPBH: Psychologists, MFTs & CPCs, Social Workers, A&D/Gambling Counselors, & ABAs	Joint Interim Standing Committee on Health and Human Services	Senate Health & Human Services	Do Pass	4/11/2025
SB429	54-352	INDIRECT	Licensing: Social Work	Revises provisions relating to social work.	Joint Interim Standing Committee on Health and Human Services	Senate Health & Human Services	Amend, Do Pass	4/10/2025
SB434	40-1107	INDIRECT	Creates Statewide Health Care Access and Recruitment Program Account for Healthcare Provider Shortages	Revises provisions relating to health care.	Senator Cannizzaro	Senate Judiciary	Amend, Do Pass	4/11/2025
FAILED FIRST HOUSE COMMITTEE DEADLINE (APR 11)								
AB152	19-209	DIRECT	Open Meeting Law	Revises provisions relating to the Open Meeting Law.	Assemblymember Gray	Assembly Government Affairs	FAILED DEADLINE	
AB170	54-840	INDIRECT	Licensing: Physicians	Licensing: Associate Physicians & Associate Osteopathic Physicians	Assemblymember Nadeem	Assembly Commerce & Labor	FAILED DEADLINE	
AB225	54-858	INDIRECT	Licensing: Barbering, Cosmetology, & Massage	Revises provisions relating to licensing of certain professions and occupations.	Assemblymember Nguyen	Assembly Commerce & Labor	FAILED DEADLINE	
SB34	54-449	DIRECT	Compact: Speech/Hearing, Physician Assistants, Nursing, OT, PT	Revises provisions relating to certain providers of health care.	Patient Protection Commission	Senate Commerce & Labor	FAILED DEADLINE	
SB129	54-221	DIRECT	Licensing by Endorsement: General	Authorizes issuance of certain occupational and professional licenses by endorsement to persons who hold similar licenses in other states.	Senator Stone	Senate Commerce & Labor	FAILED DEADLINE	
SB227	34-531	INDIRECT	Compact: School Psychologists	Enacts the Interstate Compact for School Psychologists.	Joint Interim Standing Committee on Education	Senate Education	FAILED DEADLINE	
SB265	19-918	INDIRECT	Reporting/Data Collection: Collection of Demographic Information	Revises provisions relating to governmental administration.	Senator Rogich	Senate Government Affairs	FAILED DEADLINE	
SB397	54-117	INDIRECT	Licensing: Naturopathic Physicians & Assistants	Revises provisions relating to health care.	Senator Ohrenschall	Senate Commerce & Labor	FAILED DEADLINE	



State of Nevada

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AGENDA ITEM 7

Consideration and Approval of Proposed Revisions to NAC 637B in Preparation for Public Workshop During 2025-2026 Interim

Revisions to NAC 637B have been drafted for the Board's review and include general revisions and those that will be needed upon passage of AB177. If passed, AB177 becomes effective January 1, 2026, so ideally related regulations would be adopted soon thereafter.

The entirety of NAC Chapter 637B is included to provide context for all sections. Sections noted for revision have been edited as such and are noted with **comments in a yellow box** explaining the reason for the revisions.

NAC 637B.030 includes drafted revisions to fees, to consider new/lowered fees for SLP Assistants and HAS Apprentices. A comparison of fees from other healthcare boards that license assistants is also provided as an attachment.

This meeting is intended for review and feedback on drafted or other revisions. It is recommended that a Public Workshop on these regulations be held during the Board's July 2025 meeting.

Attachments on next page:

1. *NAC License Fee Comparisons Assistants*
2. *NAC Chapter 637B Proposed Draft Revisions*

Action: Approve, Table, or Take No Action on the Matter

Board	Role	INITIAL LICENSE				RENEWAL				REINSTATEMENT				Duration/ Renewal	NAC
		Standard	Assistant	Difference \$	Difference %	Standard	Assistant	Difference \$	Difference %	Standard	Assistant	Difference \$	Difference %		
Chiropractic	Chiropractic Assistant	\$ 212.50	\$ 50.00	\$ (162.50)	-76%	\$ 350.00	\$ 60.00	\$ (290.00)	-83%	\$ 250.00	\$ 35.00	\$ (215.00)	-86%	Biennial	NAC 634.200
Occupational Therapists	OT Assistant	\$ 125.00	\$ 87.50	\$ (37.50)	-30%	\$ 87.50	\$ 62.50	\$ (25.00)	-29%	\$ 100.00	\$ 62.50	\$ (37.50)	-38%	Biennial	NAC 640A.160
Physical Therapists	PT Assistant	\$ 300.00	\$ 200.00	\$ (100.00)	-33%	\$ 150.00	\$ 100.00	\$ (50.00)	-33%	\$ 200.00	\$ 200.00	\$ -	0%	Annual	NAC 640.025
Podiatry	Podiatry Hygienist	\$ 600.00	\$ 100.00	\$ (500.00)	-83%	\$ 400.00	\$ 100.00	\$ (300.00)	-75%	\$ 400.00	\$ 100.00	\$ (300.00)	-75%	Annual	NAC 635.025 NAC 635.055
Psychological Examiners	Psychological Assistant	\$ 87.50	\$ 150.00	\$ 62.50	71%	\$ 300.00	\$ 75.00	\$ (225.00)	-75%	Not listed	Not listed	\$ -	0%	Biennial	NAC 641.019
Social Workers	Licensed Social Worker	\$ 175.00	\$ 175.00	\$ -	0%	\$ 187.50	\$ 125.00	\$ (62.50)	-33%	\$ 200.00	\$ 200.00	\$ -	0%	Annual	NAC 641B.115
Average		\$ 366	\$ 192	\$(163.75)	-56%	\$ 388.64	\$ 179.32	\$(159.25)	-55%	\$ 250.00	\$ 105.28	\$ (50.25)	-66%		

Excludes
Psych &
SW

All

Only
Chiro, OT,
Podiatry

2025-26 PROPOSED DRAFT REVISIONS TO NAC CHAPTER 637B

GENERAL PROVISIONS

NAC 637B.001 Definitions. (NRS 637B.132)

As used in this chapter, unless the context otherwise requires, the words and terms defined in NAC 637B.0015 to 637B.008, inclusive, have the meanings ascribed to them in those sections.

NAC 637B.0015 “Applicant” defined. (NRS 637B.150)

“Applicant” means a person who applies for any privilege, license, approval or authority from the Board.

NAC 637B.003 “Client” defined. (NRS 637B.132)

“Client” means a person who receives services from an audiologist, speech-language pathologist or hearing aid specialist.

NAC 637B.0045 “Licensee” defined. (NRS 637B.132)

“Licensee” means any person who holds a license as an audiologist, speech-language pathologist or hearing aid specialist pursuant to chapter 637B of NRS.

NAC 637B.008 “Standard license” defined. (NRS 637B.132)

“Standard license” means a license to engage in the practice of audiology, speech-language pathology or fitting and dispensing hearing aids that is not a provisional license, a temporary license or a limited license.

NAC NEW “Direct Supervision” defined. (NRS NEW)

“Direct supervision means in-view observation and guidance provided, either in person or through telesupervision, by a supervising speech-language pathologist to a speech-language pathology assistant, provisional licensee, or student while they perform an assigned activity. Direct supervision activities may include, but are not limited to observing, coaching, modeling, and providing real-time assistance and feedback.

NAC NEW “Indirect Supervision” defined. (NRS NEW)

“Indirect Supervision” means the monitoring or reviewing by a supervising speech-language pathologist of activities performed by a speech-language pathology assistant, provisional licensee, or student including, but not limited to demonstration, records review, review and evaluation of audio or video recorded sessions, and interactive conferences that may be conducted by telephone, email, or other forms of telecommunication.

NAC NEW “Medically Fragile” defined. (NRS NEW)

“Medically Fragile” means the condition of a client who is acutely ill and in an unstable health condition.

NAC NEW “Plan of Care” defined. (NRS NEW)

“Plan of Care ” means a written service plan developed and monitored by a supervising speech-language pathologist to meet the needs of a client, addressing needs for screening, observation, monitoring, assessment, treatment, and other services.

NAC 637B.011 Authority to use designation related to degree of doctor of audiology. (NRS 637B.150)

A person who has obtained a degree of doctor of audiology from an accredited college or university may refer to himself or herself as a “doctor of audiology” and use the corresponding initials “Au.D” or “Ph.D.”

NAC 637B.014 Applicability of provisions to person who holds credential issued by Department of Education. (NRS 637B.080, 637B.132)

1. Except as otherwise provided in subsection 2, for the purposes of subsection 1 of NRS 637B.080, the provisions of chapter 637B of NRS do not apply to a person who holds a current [credential] endorsement issued on or before September 30, 2026 by the Department of Education pursuant to chapter 391 of NRS and any regulations adopted pursuant thereto, [who engages in the practice of audiology or speech-language pathology, as applicable, within the scope of that credential] which allows a person to teach pupils who have speech and language impairments and provide speech-language pathology services in accordance with their current licensed personnel classification in the public school district in which they are employed, if the person:
 - (a) Holds an active teacher’s license issued pursuant to chapter 391 of NRS and an endorsement to teach pupils who have hearing impairments or to teach pupils who have speech and language impairments issued on or before September 30, 2026 by the Department of Education pursuant to chapter 391 of NRS and any regulations adopted pursuant thereto ;
 - (b) Is employed by a public educational institution; and
 - (c) Does not engage in the practice of audiology or speech-language pathology as an independent contractor or provide services in the private practice of audiology or speech-language pathology.
2. If a person who holds a current credential issued by the Department of Education pursuant to chapter 391 of NRS and any regulations adopted pursuant thereto also holds a valid license to engage in the practice of audiology or the practice of speech-language pathology pursuant to the provisions of chapter 637B of NRS and any regulations adopted pursuant thereto, such a person is also subject to the provisions of chapter 637B of NRS and any regulations adopted pursuant thereto regardless of the setting in which [to the extent that] he or she engages in the practice of audiology or speech-language pathology [as an independent contractor or provides services in the private practice of audiology or speech-language pathology] .

Revises per changes in AB177

NAC 637B.025 Executive Director and staff: Appointment; duties; salary. (NRS 637B.150)

The Board may:

1. Appoint an Executive Director and employ such staff as it deems necessary to carry out its duties;
2. Establish the duties of the Executive Director and the staff; and
3. Fix the salaries of the Executive Director and the staff.

NAC 637B.030 Schedule of fees. (NRS 637B.132, 637B.175)

The Board will charge and collect the following fees:

Application fee.....	\$150
Application fee for an apprentice or assistant	75
Fee for a standard license or provisional license.....	100
Fee for an apprentice or assistant license.....	50
Fee for a temporary license.....	50
Fee for a limited license.....	25
Fee for renewal of a standard license or provisional license.....	100
Fee for renewal of an apprentice or assistant license.....	50
Fee for renewal of [a] an inactive or temporary license.....	50
Reinstatement fee for a standard license or provisional license expired 30 days or more.....	100
Reinstatement fee for an apprentice or assistant license expired 30 days or more.....	75
Reinstatement fee for a standard license or provisional license expired less than 30 days.....	75
Reinstatement fee for an apprentice or assistant expired less than 30 days.....	50
Examination fee.....	250
Fee for converting to a different type of license.....	50
Fee for each additional license [or endorsement].....	50
Fee for obtaining license information.....	50

- Adds new/lowered fees for SLP Assistants & HAS Apprentices.
- Removes “endorsement” per AB177
- May also need to consider Compact “privilege to practice” fees

ADVISORY COMMITTEE ON FITTING AND DISPENSING HEARING AIDS

NAC 637B.033 Creation; number of members; terms; reappointment. (NRS 637B.132)

The Advisory Committee on Fitting and Dispensing Hearing Aids is hereby created. The Committee consists of not less than three and not more than five members appointed by the Board for a term of 2 years. Members may be reappointed to serve additional terms at the discretion of the Board.

NAC 637B.034 Membership; qualifications; chair; duties; quorum; compensation. (NRS 637B.132)

1. The Advisory Committee on Fitting and Dispensing Hearing Aids is composed of the following members:
 - (a) At least two members of the Board, one of whom must represent [dispensing] audiologists and one of whom must represent hearing aid specialists; and

Removes reference to dispensing AUD per AB177.

- (b) Not more than three additional members who are [dispensing] audiologists or hearing aid specialists or any combination thereof.
- 2. Each member of the Committee must be a [dispensing] audiologist or hearing aid specialist licensed pursuant to chapter 637B of NRS, as applicable, at the time of his or her appointment and must maintain current licensure with the Board.
- 3. The Committee shall select a Chair from among the members of the Committee who are members of the Board.
- 4. The Committee shall make recommendations to the Board on all matters relating to the fitting and dispensing of hearing aids, including, without limitation:
 - (a) Regulations governing the fitting and dispensing of hearing aids;
 - (b) A program of apprenticeship for the fitting and dispensing of hearing aids;
 - (c) Examinations and passing scores for written and practical examinations for the fitting and dispensing of hearing aids; and
 - (d) Investigations of complaints relating to the fitting and dispensing of hearing aids.
- 5. A quorum of the Committee is three members, at least one of whom must be a member of the Board.
- 6. Each member of the Committee who is not a member of the Board serves without compensation.

LICENSING; HEARING AID SPECIALISTS AND APPRENTICES

NAC 637B.035 Application: Payment of fee. (NRS 637B.132, 637B.160, 637B.175, 637B.191, 637B.194)

- 1. Any person seeking licensure by the Board or seeking to renew, reinstate or change the type of a license issued by the Board must submit a completed application on a form provided by the Board.
- 2. Each application submitted pursuant to subsection 1 must be accompanied by payment of any fee prescribed by NAC 637B.030.

NAC 637B.0355 Application: Attachment of transcript and other proof of qualifications; provision of additional information. (NRS 637B.132, 637B.160, 637B.191, 637B.194)

- 1. An applicant who is required to provide the Board with:
 - (a) An official transcript from an educational program shall ensure that a sealed, official transcript is:
 - (1) Attached to his or her application; or
 - (2) Sent directly from the educational program to the Board.
 - (b) Proof satisfactory of his or her certification by the American Board of Audiology, the American Speech-Language-Hearing Association or the National Board for Certification in Hearing Instrument Sciences, or a successor organization, shall ensure that a copy of the certification is:
 - (1) Attached to his or her application; or
 - (2) Sent directly from the certifying organization to the Board.
- 2. Proof of a license obtained in another state, territory or country shall provide such proof for any license presently held and any license held during the 5 years immediately preceding the date of application. If an applicant is required to pass an examination or complete continuing education for the issuance, renewal, reinstatement or to change the type of a license, the applicant must provide to the Board with his or her application proof that he or she has passed the examination or completed the continuing education, as applicable.

3. An applicant shall include with his or her application any additional information that the Board may require.
4. After an application is submitted to the Board, the Board may require an applicant to provide additional information or appear before the Board or one of its members for an oral interview before issuing, renewing, reinstating or converting the status of a license.

NAC 637B.0356 Application: Proof of passage of examination concerning laws and regulations relevant to practice area. (NRS 637B.132, 637B.160, 637B.191, 637B.194)

The Board **[may]** **shall** require an applicant for any category of license issued by the Board to submit with his or her application for licensure proof that the applicant has passed an examination that tests the familiarity of the applicant with the provisions of this chapter and chapter 637B of NRS and all other federal laws and regulations relevant to the practice area for which the applicant is applying.

NEEDS DISCUSSION to determine whether to revise.

NAC 637B.NEW Application: Priority review of an application for a license as a provider of health care for applicants who demonstrate they will provide health care primarily in a historically underserved community.

1. The Board will conduct a priority review no later than 15 business days following receipt of application for a license from an applicant who demonstrates they will provide health care primarily in a historically underserved community by:
 - (a) Submitting a letter from an employer that is located in a historically underserved community which states:
 - (1) That the applicant has accepted an offer of employment from the employer; and
 - (2) The date on which the applicant intends to commence such employment; or
 - (b) May prescribe additional ways in which an applicant may demonstrate that he or she will provide health care primarily in a historically underserved community.
2. As used in this section, a “historically underserved community” means:
 - (a) A census tract:
 - (1) Designated as a qualified census tract by the Secretary of Housing and Urban Development pursuant to 26 U.S.C. § 42(d)(5)(B)(ii); or
 - (2) In which, in the immediately preceding census, at least 20 percent of households were not proficient in the English language;
 - (b) A public school in this State:
 - (1) In which 75 percent or more of the enrolled pupils in the school are eligible for free or reduced-price lunches pursuant to 42 U.S.C. §§ 1751 et seq.; or
 - (2) That participates in universal meal service in high poverty areas pursuant to Section 104 of the Healthy, Hunger-Free Kids Act of 2010, Public Law 111-296; or
 - (c) Qualified tribal land, as defined in NRS 370.0325.

Revises per AB483 – pending passage & any amendments.

15 business days timeline mirrors LBE in NRS 637B.203.

NAC 637B.036 Expiration and renewal of standard or provisional license; combined application for renewal of license as audiologist and speech-language pathologist. (NRS

637B.132, 637B.160, 637B.191, 637B.194)

1. Each standard and provisional license issued by the Board, including, without limitation, each standard license that has been converted to inactive status, expires 1 year after the date on which the license was issued.
2. An application to renew a license will not be approved unless the application is submitted not later than 30 days after the date on which the license expired.
3. An application for renewal of a license as an audiologist and a license as a speech-language pathologist may be submitted on a single application.
4. An application for the renewal of a provisional license as a hearing aid specialist for a second time must include proof that the licensee [has applied to take the National Competency Examination administered by the National Board for Certification in Hearing Instrument Sciences, or its successor organization, or another comparable examination approved by the Board.] is actively practicing to complete at least two years of on-site training and work experience in fitting and dispensing hearing aids as prescribed in NAC 637B.0391.

Revises per AB177 removal of HAS requirement for NBC-HIS Cert.

NAC 637B.0363 Renewal of provisional license to engage in practice of fitting and dispensing hearing aids. (NRS 637B.132, 637B.191, 637B.194)

1. Except as otherwise provided in subsection 2, the Board may renew a provisional license to engage in the practice of fitting and dispensing hearing aids, which has been issued to a person pursuant to NRS 637B.201, if the person has not yet completed at least two years of on-site training or work experience in fitting and dispensing hearing aids as prescribed in NAC 637B.0391.
 [(a) Completed the training required for certification by the National Board for Certification in Hearing Instrument Sciences;
 (b) Achieved a passing score on the National Competency Examination administered by the National Board for Certification in Hearing Instrument Sciences, or its successor organization, or another comparable examination approved by the Board; or
 (c) Completed the training pursuant to paragraph (a) and achieved a passing score on the examination pursuant to paragraph (b).]
2. The Board will not renew a provisional license which has been issued to a person who has[:] not yet completed at least two years of on-site training and work experience in fitting and dispensing hearing aids as prescribed in NAC 637B.0391.
 [(a) Completed the training required for certification by the National Board for Certification in Hearing Instruments Sciences; and
 (b) Failed to apply to take the National Competency Examination administered by the National Board for Certification in Hearing Instrument Sciences, or its successor organization, or another comparable examination approved by the Board, at least 60 days before the expiration of the provisional license.]

Revises per AB177 removal of HAS requirement for NBC-HIS Cert.

NAC 637B.0364 Retroactive renewal of standard or provisional license. (NRS 637B.132, 637B.191, 637B.194)

A standard license or provisional license that has been expired less than 30 days may be renewed retroactively to the date of expiration of the license if the licensee satisfies all requirements for renewal of the license and pays the reinstatement fee prescribed by NAC 637B.030.

NAC 637B.0365 Reinstatement: Application; proof of completion of continuing education and certification; fees; deadline for submission of application. (NRS 637B.132, 637B.160, 637B.175, 637B.191, 637B.194)

1. An applicant for reinstatement of his or her license shall include with the application for reinstatement:
 - (a) Proof satisfactory that the applicant has completed the continuing education that is required of a licensee for the year immediately preceding the application for reinstatement.
 - (b) The fees imposed by the Board pursuant to NRS 637B.175 for the reinstatement of a license.
2. The reinstatement of a license that has been expired for 30 days or more must not be retroactive.
3. An application to reinstate a license must be submitted not later than 3 years after the date on which the license expired.

NAC 637B.0368 Conversion of standard license to inactive status; duty of holder of inactive license to obtain continuing education; renewal of inactive license; conversion of inactive license to active status. (NRS 637B.132, 637B.191, 637B.194)

1. A licensee who holds a standard license that is not suspended, revoked or otherwise restricted may convert his or her license to inactive status by submitting with his or her application to renew the license:
 - (a) A written request to convert the license to inactive status; and
 - (b) An attestation that he or she will no longer practice or represent to others that he or she is authorized to engage in the practice of audiology, speech-language pathology or fitting and dispensing hearing aids in this State after the license has been converted to inactive status.
2. A licensee who holds a standard license that is on inactive status shall comply with the requirements for continuing education that apply to a licensee who holds a standard license that is on active status.
3. A standard license that is on inactive status must be renewed in the manner prescribed in NAC 637B.035, 637B.0355 and 637B.036.
4. A person may convert the status of a standard license from inactive to active at any time by submitting to the Board a written request, an application pursuant to NAC 637B.035 and any materials required pursuant to NAC 637B.0355.

NAC 637B.037 Application for license expired 3 years or more. (NRS 637B.150)

If a person's license has been expired for 3 years or more, he or she must apply for a license as an applicant for an original license.

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 not sooner than 30 days after the date of the previous 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 24 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)

Removes reference to dispensing AUD per AB177.

1. 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.

NAC 637B.0375 Alteration of license or license card prohibited. (NRS 637B.150)

A licensee shall not alter a license or license card issued by the Board.

NAC 637B.038 Practice under any name under which licensee does not hold license prohibited; change of name; issuance of duplicate license. (NRS 637B.132, 637B.194)

1. A licensee shall not engage in the practice of audiology, speech-language pathology or fitting and dispensing hearing aids under any name under which the licensee does not hold a license issued by the Board.
2. If a licensee changes his or her legal name after the issuance of his or her license, the licensee shall submit a copy of a marriage certificate or court decree to the Board not later than 30 days after the change. The Board will, upon receiving sufficient evidence that a licensee has changed his or her legal name, issue a new license with the licensee's legal name thereon.
3. The Board may issue a duplicate license to any licensee who certifies that his or her license has been lost or destroyed.

NAC 637B.0382 Practice without license: Issuance of citation; assessment of administrative fine; appeal of citation; hearing; waiver of administrative fine. (NRS 637B.132, 637B.290)

1. If a person has engaged or is engaging in the practice of audiology, the practice of speech-language pathology or the practice of fitting and dispensing hearing aids in this State without holding a valid license issued pursuant to the provisions of chapter 637B of NRS, the Board will issue and serve on the person a citation that contains an order for the person to cease and desist as authorized by NRS 637B.290.
2. A citation issued pursuant to subsection 1 may include the assessment of an administrative fine against the person to whom the citation is issued. If an administrative fine is assessed against a person to whom a citation is issued, such an administrative fine must be:
 - (a) If unauthorized practice occurred over a period of 30 days or less, not less than \$50 or more than \$200.
 - (b) If the unauthorized practice occurred over a period of more than 30 days, not less than \$200 or more than \$5,000.
3. A person to whom a citation is issued pursuant to subsection 1 may appeal the citation by submitting a written request for a hearing to the Board. The written request for a hearing must be submitted to the Board not later than 30 days after the date on which the citation was issued. Upon receipt of a written request for a hearing, the Board will conduct a hearing on the citation. At the conclusion of the hearing, the Board may waive any administrative fine assessed against the person to whom the citation was issued if:
 - (a) The administrative fine was assessed for a first offense;
 - (b) The unauthorized practice for which the administrative fine was assessed occurred due to a failure by the person to renew his or her license in a timely manner pursuant to NAC 637B.036 and the license was reinstated not later than 60 days after the date on which the license expired; or
 - (c) The Board determines that good cause exists. As used in this paragraph, “good cause” includes, without limitation, circumstances under which a person suffers from an illness, injury or disability, experiences a family hardship or is subject to other circumstances beyond the person’s control as may be determined by the Board.
4. If a person against whom a citation has been issued pursuant to subsection 1 submits a written request for a hearing to the Board and the written request seeks a waiver of any administrative fine assessed against the person, the person who submits such a written request must include with the request proof necessary to demonstrate the existence of one or more of the circumstances justifying the waiver of the administrative fine as set forth in subsection 3.

NAC 637B.0385 Information to be maintained with Board; notices provided to licensee by Board. (NRS 637B.150)

1. Each licensee shall:
 - (a) Maintain with the Board the licensee’s current residential address, business address or other contact information, including, without limitation, the telephone number and electronic mail address of the licensee, if available.
 - (b) Notify the Board of any change in the information maintained pursuant to paragraph (a) not later than 30 days after the change.
2. The Board will provide by United States mail to the last known residential address or by electronic mail to the last known electronic mail address of the licensee provided pursuant to paragraph (a) of subsection 1 any notice to a licensee that is required by law or regulation.

NAC 637B.039 Verification of license by Board upon request of licensee. (NRS 637B.150)

A person may request that the Board verify his or her license to another organization or to the licensing authority of another state or territory of the United States by submitting a written request for verification to the Board.

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)

1. Except as otherwise provided in subsection 3, the in-service training of a person who has been issued an apprentice license by the Board pursuant to NRS 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 NAC 637B.0394.
2. 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 NRS 637B.238, may not serve as an apprentice for more than 3 years without passing the examination set forth in NAC 637B.0373.
3. 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. 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.
5. An apprentice may receive credit toward the 2 year requirement prescribed above 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.
6. An applicant for a standard license to engage in the practice of fitting and dispensing hearing aids not holding an associate's degree or bachelor's degree in hearing instrument sciences pursuant to NRS 637B.193 must provide proof satisfactory of completion of any combination of education, training, and experience totaling a minimum of 2 years:
 - (a) 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.
 - (b) Licensure as a Hearing Aid Specialist, Hearing Aid Specialist Apprentice or Equivalent in the District of Columbia or any state or territory of the United States.

Revises per AB177 removal of HAS requirement for NBC-HIS Cert.

NAC 637B.0392 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 a [REMOVED] 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;

Revises per AB177 removal of HAS requirement for NBC-HIS Cert.

- (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.

NAC 637B.0394 In-Service Training for Hearing Aid Specialists and Apprentices: Requirements for On-Site Training and Work Experience; Core Competencies; Review and Documentation of Progress; Report and Proof of Compliance. (NRS 637B.132, 637B.194, 637B.235)

Revises per AB177 removal of HAS requirement for NBC-HIS Cert.

1. The on-site training and work experience portion of the in-service training of a [n] 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 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 in each core competency, by signature and date, on a form provided by the Board.

NAC 637B.0396 Qualifications to act as sponsor of apprentice; limitation on number of apprentices or sponsors. (NRS 637B.132, 637B.194, 637B.235)

1. To be eligible to act as a sponsor of an apprentice, a hearing aid specialist or **[dispensing]** audiologist must:
 - (a) Hold a standard license that is on active status;
 - (b) Have experience as a hearing aid specialist or **[dispensing]** audiologist **who fits and dispenses hearing aids** for a minimum of 3 years;
 - (c) Be employed by the same employer as the apprentice during the term of the on-site training and work experience portion of the in-service training of the apprentice; **[and]**
 - (d) Be in good standing with the Board and have no record of disciplinary action; **and**
 - (e) **Except as otherwise provided in NRS 281.210 or NAC 284.375, not be related to the apprentice within the third degree of consanguinity or affinity, including:**
 - (1) The spouse, child, parent or sibling of the apprentice;
 - (2) The spouse of a child, parent or sibling of the apprentice;
 - (3) The aunt, uncle, niece, nephew, grandparent, grandchild or first cousin of the apprentice; or
 - (4) In a dating relationship with the individual.
2. A hearing aid specialist or **[dispensing]** audiologist shall not sponsor more than two apprentices at one time, and an apprentice shall not have more than two sponsors at one time.

- Removes reference to dispensing AUD per AB177.
- Adds section to prohibit familial relationship between sponsor & apprentice.

NAC 637B.0398 Duties of sponsor; review of work; direct supervision not required for certain duties; prohibition on operating office or satellite office without approval of Board. (NRS 637B.132, 637B.194, 637B.235)

1. A sponsor of an apprentice shall:
 - (a) Except as otherwise provided in subsection 3, provide direct supervision to the apprentice;
 - (b) Determine the competency level of the apprentice to perform tasks relating to fitting and dispensing hearing aids;
 - (c) Evaluate the work of the apprentice;
 - (d) Document the training provided to and the direct supervision of the apprentice; and
 - (e) Provide written notification to the Board if:
 - (1) The apprentice is no longer under the sponsorship of the sponsor;
 - (2) The apprentice withdraws from or terminates his or her in-service training;
 - (3) The sponsor withdraws as a sponsor for the apprentice;
 - (4) The apprentice has completed 1 year of in-service training under the direct supervision of the sponsor and the sponsor believes that the apprentice is competent to work without physical on-site supervision; or
 - (5) The apprentice successfully completes all the requirements for in-service training.
2. All work completed by an apprentice must be reviewed daily and signed by the sponsor and the apprentice.

3. An apprentice is not required to be under the direct supervision of a sponsor when performing any of the duties that may be delegated to an unlicensed assistant pursuant to NAC 637B.0442.
4. An apprentice shall not maintain, run or operate an office or a satellite office in which hearing aids are fitted and dispensed without the approval of the Board.
5. As used in this section, “direct supervision” means:
 - (a) During the first year of the in-service training of an apprentice, being physically on-site at the same location as the apprentice.
 - (b) After the first year of the in-service training of an apprentice and upon attaining the approval of the Board, daily communication with the apprentice without the requirement of being physically on-site at the same location as the apprentice.

LICENSING, SCOPE OF PRACTICE, PROHIBITED ACTIVITIES, AND SUPERVISION; SPEECH-LANGUAGE PATHOLOGY ASSISTANTS

NAC 637B.NEW Application: Clinical Training Experience (NRS NEW)

1. An applicant for a license to practice as a speech-language pathology assistant who is a new graduate holding a bachelor’s degree or master’s degree in speech-language pathology or communication sciences and disorders awarded by an educational institution and does not currently or has not previously held a license as a speech-language pathology assistant issued by the District of Columbia or any state or territory of the United States must provide one of the following with the application for licensure:
 - (a) Proof satisfactory of 75 hours of clinical training, made up of at least 25 hours of clinical observation experience and 50 hours of clinical assisting experience obtained while earning the degree as evidenced in the academic transcript or verified by the Registrar, Dean, Department Head, or supervising speech-language-pathologist; or
 - (b) Proof satisfactory of 75 hours of clinical training, made up of at least 25 hours of clinical observation experience and 50 hours of clinical assisting experience obtained while earning Certification as a Speech-Language Pathology Assistant through the American Speech-Language-Hearing Association; or
 - (c) A Clinical Training Plan which outlines a program of on-the-job clinical observation and clinical assisting experience under the direct supervision of an identified supervising speech-language pathologist to obtain the requisite 75 hours of fieldwork experience, as prescribed in NAC 637B.XXX.
 - (1) In order to obtain these hours, the applicant shall first obtain the speech-language pathologist assistant license by submitting the forms, fees, documentation, and completed Clinical Training Plan prescribed in NRS 637B.XXX and NAC 637B.XXX; and
 - (2) The Board shall evaluate the documentation and fees submitted to determine if the assistant license shall be issued. Additional information or revisions may be required before approval is granted.
 - (3) Clinical training may not begin until the speech-language pathology assistant license is issued and the Clinical Training Plan is approved by the Board.

SLPA Clinical Training Req’s

NAC 637B.NEW Clinical Training Plan (NRS NEW)

SLPA Clinical Training Plan

1. A Clinical Training Plan must include a proposed program of on-the-job clinical observation and clinical assisting experience for a speech-language pathology assistant applicant who is a new graduate and holding a bachelor's degree or master's degree in speech-language pathology or communication sciences and disorders awarded by an educational institution, but has not completed at least 75 total hours of fieldwork experience, made up of 25 hours of clinical observation experience and 50 hours of clinical assisting experience.
2. Clinical observation and clinical assisting hours completed while earning the degree or certification and evidenced in the academic transcript, verified by the Registrar, Dean, or Department Head of the issuing institution, a prior supervising speech-language pathologist, or verified by current ASHA SLPA Certification may be incorporated into the Clinical Training Plan and combined with planned future activities to achieve the required 75 hours of training prescribed in NAC 637B.XXX(a).
3. All hours worked by the licensed speech-language pathology assistant must be under the direct supervision of the licensed supervising speech-language pathologist identified in the Clinical Training Plan. Direct supervision must total no less than 25% of the speech-language pathology assistant's total contact with each client/patient.
4. Clinical Training Plan hours must be successfully completed within 60 days of the issuance of the speech-language pathology assistant license.
5. No later than 5 business days following completion of the Clinical Training Plan hours, the supervising speech-language pathologist identified in the Plan shall notify the Board of completion and submit required documentation attesting to the following:
 - (a) The total number of clinical observation and clinical assisting experience hours worked by the licensed speech-language pathology assistant under the direct supervision of the licensed supervising speech-language pathologist.
 - (b) The licensed speech-language pathology assistant's competency in all areas of clinical observation and clinical assisting.
6. The licensed speech-language pathology assistant may continue to practice under the direct supervision of the identified licensed supervising speech-language pathologist while the Board evaluates the Clinical Training Plan completion documentation identified in paragraph (4).
7. If the Clinical Training Plan is not completed within 60 days, one of the following must occur:
 - (a) If an initial Clinical Training Plan is not successfully completed after 60 days, a revised plan may be submitted describing the need for the extension and related extenuating circumstances, and requesting an additional 60 days; or
 - (b) If a revised plan is not successfully completed after 120 days, a revised plan may be submitted describing the need for the extension and related extenuating circumstances, and requesting review by the Board to consider further extension; or
 - (c) A speech-language pathology assistant experiencing extenuating circumstances may request a conversion of their license to inactive status and suspend the Clinical Training Plan until the license is converted back to active status; or
 - (d) The Board may place the license of a speech-language pathology assistant on inactive status and prohibit practice if:
 - (1) The speech-language pathology assistant is required to but has not completed a Clinical Training Plan; and
 - (2) Does not have an active training plan in place and/or does not have an assigned supervising speech-language pathologist; or
 - (3) The supervising speech-language pathologist has reported concerns regarding the speech-language pathology assistant's competency, ethics, or related issues requiring further investigation by the Board.
8. As used in this section, "extenuating circumstance" includes, without limitation:

- (a) Extreme illness or injury;
 - (b) Extreme financial or familial hardship; or
 - (c) Military service.
9. A speech-language pathology assistant practicing under a Clinical Training Plan may not:
- (a) Practice and/or engage in training hours until the supervising speech-language pathologist has personally verified that the assistant license has been issued, and this Clinical Training Plan has been submitted and approved by the Board;
 - (b) Practice and/or engage in training hours at any time there is not an approved Clinical Training Plan in place, including transition between employers, supervising speech-language pathologists, or while waiting for plan approval or a Board review for a plan extension;
 - (c) Carry an assigned caseload or engage in any practice that does not involve observing and assisting with the caseload assigned to the identified supervising speech-language pathologist.
10. A speech-language pathology assistant practicing under a Clinical Training Plan must:
- (a) Notify the Board immediately if there is a change or end to employment or supervision from the identified speech-language pathologist and submit a revised Clinical Training Plan;
 - (b) Notify the Board immediately once the Clinical Training Plan has been successfully completed;
 - (c) Notify the Board immediately when the Clinical Training Plan expires unsuccessfully and complete a revised Plan as described in paragraph 7 of this section.
11. A supervising speech-language pathologist providing supervision to a speech-language pathology assistant practicing under a Clinical Training Plan must:
- (a) Provide direct supervision to the speech-language pathology assistant in accordance with NRS 637B and NAC 637B;
 - (b) Determine the competency level of the speech-language pathology assistant to perform tasks relating to the practice of speech-language pathology;
 - (c) Evaluate the work of the speech-language pathology assistant;
 - (d) Document and maintain records of the training provided to and direct supervision of the speech-language pathology assistant;
 - (e) Provide written notification to the Board immediately if:
 - (1) The speech-language pathology assistant is no longer under their supervision;
 - (2) They no longer have the same employer as the speech-language pathology assistant;
 - (3) The speech-language pathology assistant withdraws from or terminates their employment and/or clinical training;
 - (4) They wish to withdraw as the supervisor for the speech-language pathology assistant.

NAC 637B.NEW Speech-language therapy assistant, provisional licensee, or student: Delegation of duties by supervising speech-language pathologist; limitations. (NRS NEW)

1. A supervising speech-language pathologist shall supervise any services delivered to a client by a speech-language pathology assistant, provisional licensee, or student and ensure these are consistent with the client's plan of care.
2. Only a supervising speech-language pathologist may:
 - (a) Determine services included in the client's plan of care that are appropriate to delegate to a speech-language pathology assistant, provisional licensee, or student.
 - (b) Delegate services to be delivered by a speech-language pathology assistant, provisional licensee, or student.
 - (c) Instruct a speech-language pathology assistant, provisional licensee, or student regarding:
 - (1) The specific program of intervention of a client;
 - (2) Any precaution to be taken to protect a client;
 - (3) Any special problem of a client
 - (4) Any procedure which should not be administered to a client; and
 - (5) Any other information required to treat a client.
3. A supervising speech-language pathologist shall not delegate responsibilities to a speech-language pathology assistant, provisional licensee, or student which are beyond the scope of the delegate's training.
4. A supervising speech-language pathologist may only delegate activities to a student after consideration of clients' needs, the service setting, the guidelines established by the educational program, and their assessment of the student's training and competence.
5. A supervising speech-language pathologist may delegate any activity to a provisional licensee after consideration of clients' needs, the service setting, and their assessment of the provisional licensee's training and competence.
6. A supervising speech-language pathologist may delegate the following activities to a speech-language pathology assistant or student after consideration of clients' needs, the service setting, and their assessment of the speech-language pathology assistant or student's training and competence:
 - (a) Assisting with client assessment, including, but not limited to setting up the testing environment, gathering and prepping materials, and taking notes;
 - (b) Administering and scoring progress monitoring tools with no clinical interpretation if all of the following conditions are met:
 - (1) The speech-language pathology assistant meets the examiner requirements specified in the examiner's manual; and
 - (2) The supervising speech-language pathologist has verified their competence in administration of the tool; and
 - (3) The supervising speech-language pathologist conducts the analysis of the results and signs off on the final score.
 - (c) Implementing client care plans as developed and directed by the supervising speech-language pathologist as follows:
 - (1) Providing direct therapy services, both in-person and through telepractice through a variety of service delivery models to clients to address treatment goal(s);
 - (2) Adjusting and documenting the amount and type of support or scaffolding provided to the client in treatment to facilitate progress;
 - (3) Developing and implementing activities and materials for teaching and practice of skills to address the client's treatment goal(s)
 - (d) Documenting client performance and reporting this information to the supervising speech-language pathologist in a timely manner.

- (e) Providing coaching to client caregivers for facilitation and carryover of skills.
- (f) Sharing objective information without interpretation or recommendations as directed by the supervising speech-language pathologist regarding client performance to clients, caregivers, families, and other service providers
- (g) Assisting clients with augmentative and alternative communication devices and materials as follows:
 - (1) Programming augmentative and alternative communication devices;
 - (2) Developing low-tech augmentative and alternative communication materials for clients; and
 - (3) Providing training and technical assistance to clients, families, and caregivers in the use of augmentative and alternative communication devices.
- (h) Working with clients who communicate using a language other than English or who are developing English language skills when the supervising speech-language pathologist determines they have sufficient prior training and experiences in working with multilingual clients and the specific client's first language, including:
 - (1) Assisting the supervising speech-language pathologist with interpretation and translation during screening and assessment activities without providing clinical interpretation of results;
 - (2) Interpreting for clients, families, and caregivers; and
 - (3) Providing services in a client's first language.
- (i) Assisting with administrative tasks to include:
 - (1) Clerical duties and site operations such as scheduling, recordkeeping, and maintaining inventory of supplies and equipment;
 - (2) Performing safety checks and maintenance of equipment; and
 - (3) Preparing materials for screening, assessment, and treatment services.
- (j) Engaging in prevention, advocacy, and promotion activities related to communication, swallowing, and related disorders with oversight from the supervising speech-language pathologist.

NAC 637B.NEW Speech-language pathology assistant prohibited from performing certain activities; disciplinary action. (NRS NEW)

1. A speech-language pathology assistant shall not:
 - (a) Interpret assessment tools for the purpose of diagnosing disability or determining eligibility or qualification for services;
 - (b) Administer, score, or interpret feeding, swallowing, or other screenings, checklists, or clinical assessment tools;
 - (c) Interpret a client's record or evaluation, identify any problem of a client, or share information with a client or their family;
 - (d) Diagnose communication and feeding and swallowing disorders;
 - (e) Write, develop, or revise a client's treatment goal(s) or plan of care in any way;
 - (f) Develop or determine feeding and swallowing strategies and precautions;
 - (g) Provide vocal therapy treatment to a client;
 - (h) Use or disclose clinical or confidential information by any method to recipients who have not been approved by the supervising speech-language pathologist, unless mandated by law;

SLPA Prohibited Activities

- (i) Sign or initial any formal documents without the supervising speech-language pathologist's co-signature;
 - (j) Make referrals for additional services;
 - (k) Provide services to a client without following the plan of care prepared by the supervising speech-language pathologist;
 - (l) Provide services to clients without access to supervision;
 - (m) Select an augmentative and alternative communication system or device for a client;
 - (n) Treat a medically fragile client without direct supervision;
 - (o) Perform activities that require specialized knowledge and training;
 - (p) Provide input in a treatment meeting without the presence of or prior approval of the supervising speech-language pathologist;
 - (q) Discharge a client from services;
 - (r) Perform tasks when a supervising speech-language pathologist cannot be reached by personal contact, including, but not limited to phone, pager, or other immediate physical or electronic means.
 - (s) Perform tasks when a supervising speech-language pathologist is no longer available or assigned to provide the level of supervision stipulated until a new supervising speech-language pathologist has been designated.
2. A speech-language pathology assistant must:
 - (a) Clearly identify themselves as a speech-language pathology assistant or provisional licensee to clients, families, caregivers, and others both verbally and in writing; and
 - (b) Comply with federal, state, and local regulations including, but not limited to:
 - (1) The Health Insurance Portability and Accountability Act (HIPAA);
 - (2) The Family Educational Rights and Privacy Act (FERPA);
 - (3) Reimbursement requirements; and
 - (4) State statutes and rules regarding speech-language pathology assistant education, training, and scope of practice.
 - (c) Comply with the following responsibilities related to providing cultural and linguistic supports:
 - (1) Adjust communication style and expectations to meet the needs of clients, patients, and students from different cultural groups and to provide services in a culturally responsive manner;
 - (2) Provide information to families and staff regarding the influence of first language on the development of communication and related skills in a second language (under the direction of the supervising speech-language pathologist).
 - (3) Develop an understanding of the family dynamic from a cultural perspective to effectively engage in meetings surrounding intake, discussions of the therapy plan of care and other communication scenarios surrounding practices for addressing communication concerns; and
 - (4) Engage in continuing education and training opportunities focusing on the assessment and intervention process when working with individuals from culturally and linguistically diverse backgrounds.
 3. A speech-language pathology assistant is subject to disciplinary action if they perform any activity in violation of this section.
 4. A student who performs any activity in this section is subject to administrative action for unlicensed practice pursuant to NRS 637B.290.

NAC 637B.NEW Authority and qualifications to act as a supervising speech-language pathologist; supervision ratios. (NRS NEW)

1. A supervising speech-language pathologist may provide supervision, including telesupervision, to any of the following and within the scope of authority as described:
 - (a) In compliance with supervisory responsibilities prescribed in NRS 637B and NAC 637B to a person licensed by this Board pursuant to NRS 637B as a Speech-Language Pathology Assistant;
 - (b) In compliance with supervisory responsibilities prescribed in NRS 637B and NAC 637B and ASHA supervision requirements to a person licensed by this Board pursuant to NRS 637B as a provisional speech-language pathologist who is completing the clinical fellowship experience to earn the ASHA Certificate of Clinical Competence (CCC-SLP);
 - (c) In compliance with supervisory responsibilities prescribed in NRS 637B and NAC 637B and the guidelines established by the educational program for a student enrolled in a program accredited by the ASHA Council on Academic Accreditation or a successor organization approved by the Board to obtain a bachelor's or master's degree in speech-language pathology or communication science disorders.
2. To be eligible to act as a supervising speech-language pathologist, a speech-language pathologist must:
 - (a) Hold a standard license issued by this Board pursuant to NRS 637B that is on active status, in good standing, and with no record of disciplinary action;
 - (b) Have experience as a speech-language pathologist for a minimum of 2 years post-award of the CCC-SLP;
 - (c) Have completed 2 hours of professional development in clinical instruction/supervision; and
 - (d) Share the same employer as any speech-language pathology assistant or provisional licensee they supervise.
 - (e) Except as otherwise provided in NRS 281.210 or NAC 284.375, not be related to the apprentice within the third degree of consanguinity or affinity, including:
 - (1) The spouse, child, parent or sibling of the apprentice;
 - (2) The spouse of a child, parent or sibling of the apprentice;
 - (3) The aunt, uncle, niece, nephew, grandparent, grandchild or first cousin of the apprentice; or
 - (4) In a dating relationship with the individual.
3. A supervising speech-language pathologist is responsible for determining the appropriate number of supervisees they can manage within their workload while maintaining the highest level of quality services provided. A supervising speech-language pathologist may not be the supervisor of record for a combined total of no more than three persons listed below at the same time:
 - (a) No more than two provisional licensees at the same time.
 - (b) No more than two speech-language pathology assistants at the same time.
 - (c) No more than two students at the same time.
 - (d) A speech-language pathology assistant shall not have more than three supervising speech-language pathologists per employer at one time.

SLPA Supervisor Requirements

Adds section to prohibit familial relationship between sponsor & apprentice (added post SLP-Subcommittee review).

NAC 637B.NEW Speech-language pathology assistant: Verification to Board of employment and supervision; notice of termination; number of primary supervisors required per employer of record. (NRS NEW)

SLPA Supervisor Verification

1. A speech-language pathology assistant shall submit verification of their employment and supervision by a supervising speech-language pathologist to the Board within 30 days after a change in employment or supervisor. The verification must be submitted in a format approved by the Board.
2. A supervising speech-language pathologist supervisor shall notify the Board within 30 days after the termination of their supervision of a speech-language pathology assistant.
3. A speech-language pathology assistant must have at least one primary supervising speech-language pathologist and may have no more than two alternate supervising speech-language pathologists for each employer of record.

NAC 637B.NEW Supervision provided by supervising speech-language pathologist. (NRS NEW)

SLPA Supervision

1. A speech-language pathology assistant, provisional licensee, or student shall not practice speech-language pathology without the general supervision of a supervising speech-language pathologist. Immediate physical presence or constant presence on the premises where the speech-language pathology assistant, provisional licensee, or student is practicing is not required of the speech-language pathologist.
2. A supervising speech-language pathologist must develop a supervision plan with each speech-language pathology assistant, provisional licensee, or student they supervise that is reviewed and revised as the supervisee integrates skills and attains competency.
3. When supervising provisional licensees or students, a supervising speech-language pathologist must follow applicable supervision guidelines that complies with the requirements of the clinical fellowship experience or educational program the supervisee is enrolled in.
4. A supervising speech-language pathologist must develop a supervision plan with each speech-language pathology assistant, provisional licensee, or student they supervise that is reviewed and revised as the supervisee integrates skills and attains competency. Supervision provided by the supervising speech-language pathologist shall be consistent with the:
 - (a) Skill and experience demonstrated by the speech-language pathology assistant, provisional licensee, or student;
 - (b) Clients' needs;
 - (c) Service setting;
 - (d) Tasks assigned; and
 - (e) Laws and regulations that govern speech-language pathology assistant, provisional licensee, and students.
5. A supervising speech-language pathologist overseeing a speech-language pathology assistant working under a Clinical Training Plan to obtain on-the-job clinical observation and assisting training shall provide supervision in accordance with NRS 637B and NAC 637B. Direct supervision must total no less than 25% of the speech-language pathology assistant's total contact with each client/patient.
6. To provide satisfactory supervision, a supervising speech-language pathologist shall:
 - (a) Plan, develop, and supervise all client care and services delegated to and delivered by a speech-language pathology assistant, provisional licensee, or student;

- (b) Have first contact with every client before a speech-language pathology assistant, provisional licensee, or student is allowed to provide services to the client independently, including, but not limited to establishing rapport, gathering baseline data, and obtaining documentation;
 - (c) Assign clients to each speech-language pathology assistant, provisional licensee, or student they supervise based on the supervising speech-language pathologist's assessment of the supervisee's competence, skills, and experience;
 - (d) Review every plan of care as needed for timely implementation of modifications and make all case management decisions;
 - (e) Provide direct supervision to each speech-language pathology assistant, provisional licensee, or student they supervise for each client treated by the speech-language pathology assistant, provisional licensee, or student at least every 30–60 days, depending on the setting and frequency of sessions.
 - (f) Provide indirect supervision at regular intervals to each speech-language pathology assistant, provisional licensee, or student they supervise for each client treated by the supervisee;
 - (g) Conduct ongoing competency evaluations of each speech-language pathology assistant, provisional licensee, or student they supervise;
 - (h) Provide and encourage ongoing education and training opportunities for each speech-language pathology assistant, provisional licensee, or student they supervise that are consistent with the competencies and skills required to meet the needs of the clients served;
 - (i) Accurately document and regularly record all supervisory activities, including but not limited to direct, indirect, and telesupervision provided to each speech-language pathology assistant, provisional licensee, or student they supervise;
 - (j) Maintain an active interest in collaborating with and developing the competency of each speech-language pathology assistant, provisional licensee, or student they supervise;
 - (k) Retain legal and ethical responsibility for all clients served by each speech-language pathology assistant, provisional licensee, or student they supervise.
7. A supervising speech-language pathologist who will not be able to supervise a speech-language pathology assistant or provisional licensee for more than 1 week must:
- (a) Inform each speech-language pathology assistant or provisional licensee they supervise of the planned absence;
 - (b) Notify the employer or site administrator that other arrangements must be made while the supervising speech-language pathologist is unavailable for each speech-language pathology assistant or provisional licensee they supervise; and
 - (c) Inform all clients, families, and caregivers if their speech-language services will be rescheduled.

PROFESSIONAL CONDUCT AND STANDARDS OF PRACTICE

NAC 637B.042 Professional responsibility. (NRS 637B.132)

A licensee:

1. Shall not misrepresent, in advertising or otherwise, his or her education, training, type of license or certificate, qualifications, competence or service, or the results to be achieved if he or she provides service to a client.
2. Shall not engage in the practice of audiology, speech-language pathology or fitting and dispensing hearing aids while the licensee is impaired by:
 - (a) Alcohol, drugs or any other chemical; or

- (b) A mental or physical condition that prevents him or her from safely engaging in the practice of audiology, speech-language pathology or fitting and dispensing hearing aids.
- 3. Shall not use his or her relationship with a client to further his or her own personal, religious, political or business interests.
- 4. Shall set and maintain professional boundaries with clients, interns and persons with whom the licensee works.
- 5. Shall not give or receive, directly or indirectly, a fee, commission, rebate or other compensation for professional services that the licensee has not actually and personally provided.
- 6. Except as otherwise provided in subsection 7, shall not disparage the qualifications of any colleague.
- 7. Shall report to the Board any unlicensed, unauthorized, unqualified or unethical practice of audiology, speech-language pathology or fitting and dispensing hearing aids that is occurring.
- 8. Shall not attempt to diagnose, prescribe for, treat or provide advice for any problem which is outside of his or her field of competence, the scope of the practice of audiology, speech-language pathology or fitting and dispensing hearing aids or the scope of his or her license or certificate.
- 9. Shall base his or her practice upon the recognized knowledge relevant to audiology, speech-language pathology or fitting and dispensing hearing aids.
- 10. Shall critically examine and keep current with emerging knowledge relevant to the practice of audiology, speech-language pathology or fitting and dispensing hearing aids.
- 11. Based upon recognized knowledge and standards for the practice of audiology, speech-language pathology or fitting and dispensing hearing aids, shall prepare and maintain in a timely manner a record for each of his or her clients which:
 - (a) Sets forth his or her assessment of the problems of the client, plan of action for the client, course of treatment to that client and progress notes regarding the course of treatment of the client; and
 - (b) Includes copies of other relevant documentation, including, without limitation:
 - (1) All documents relating to the informed consent given by the client;
 - (2) All documents relating to the release of information regarding the client; and
 - (3) All other legal documents regarding the client.
- ➔ As used in this subsection, “assessment” means an evaluation of the client that is based upon comprehensive information about the client.
- 12. Shall complete and submit any reports required by this chapter and chapter 637B of NRS, or pursuant to any rule, order or instruction of a court of competent jurisdiction, in a timely manner.
- 13. Shall comply with the provisions of this chapter and chapter 637B of NRS and all other applicable federal laws and regulations.
- 14. Shall not authorize a person under the supervision of the licensee to perform services that are outside of the scope of the license, certificate, training or experience of the person performing the services, or allow such a person to hold himself or herself out as having expertise in a field or activity in which that person is not qualified.
- 15. Shall notify the Board in writing within 10 days after:
 - (a) An action is taken against any license, certification, registration or other credential held by the licensee that was issued by another state or territory of the United States;
 - (b) A criminal charge is filed against the licensee;

- (c) The licensee is convicted of a criminal offense, other than a traffic offense which is a misdemeanor that does not involve alcohol or controlled substances;
 - (d) A civil action, including, without limitation, an action for malpractice, is filed against the licensee; or
 - (e) A settlement or judgment is made in any civil action, including, without limitation, an action for malpractice, in any case filed against the licensee for any act relating to the practice of audiology, speech-language pathology or fitting and dispensing hearing aids.
16. A licensee shall not discriminate in the provision of services to a person seeking to receive or receiving services based wholly or partially on the actual or perceived:
- (a) Race, color, national origin, age, physical or mental disability, sexual orientation or gender identity or expression of the person, family member of the person or a person with whom the person associates; or
 - (b) Sex, including, without limitation, sex characteristics, intersex traits and pregnancy or related conditions, of the person, a family member of the person or a person with whom the person associates;
- unless doing so requires the licensee to take or refrain from taking any action in violation of reasonable medical standards, and/or the licensee has adopted or is following a policy that is applied uniformly and in a nondiscriminatory manner.

Added per SB352 – pending passage & any amendments.

NAC 637B.044 Responsibility to client. (NRS 637B.132)

1. A licensee shall serve his or her clients with professional skill and competence.
2. If a licensee must act on behalf of a client who has been declared to be incompetent or if a client is otherwise found by the Board to be incapable of acting in his or her own best interest, the licensee shall safeguard the interests and rights of that client.
3. If another person has been legally authorized to act on behalf of an incompetent client, a licensee shall deal with the legal representative of the client in accordance with the best interest of the client.
4. A licensee shall not practice, condone, facilitate or collaborate with any form of discrimination on the basis of race, color, sex, sexual orientation, age, religion, national origin, social, economic, health or marital status, political belief, diagnosis or physical disability, or on the basis of any preference or personal characteristic, condition or status of a person.
5. A licensee shall not misrepresent to a client the efficacy of his or her service or the results to be achieved.
6. A licensee shall apprise each of his or her clients of the risks, rights, opportunities and obligations, financial or otherwise, associated with the provision of services to the client for audiology, speech-language pathology or fitting and dispensing hearing aids.
7. A licensee shall seek the advice and counsel of his or her colleagues and supervisors when such a consultation is in the best interest of the client.
8. A licensee shall terminate service to a client and a professional relationship with a client when the service and relationship are no longer required or no longer serve the needs of the client.
9. A licensee shall not withdraw his or her services precipitously, except under unusual circumstances and after giving careful consideration to all factors in the situation and taking care to minimize possible adverse effects to the client.
10. A licensee who anticipates the termination or interruption of service to a client shall notify the client as promptly as possible and seek the transfer, referral or continuation of service in relation to the needs and preferences of the client.

11. A licensee shall not influence or attempt to influence a client in any manner which could be reasonably anticipated in his or her deriving benefits of an unprofessional nature from the client during the time that the client is receiving professional services from the licensee and for 2 years after the termination of those services.

NAC 637B.NEW Code of Ethics: Adoption by reference; effect of violation. (NRS 637B.132)

1. The Board hereby adopts by reference:
 - (a) The *ASHA Code of Ethics* of the American Speech-Hearing Association as a standard for professional conduct in the State of Nevada for the practice of speech-language pathology and audiology.
 - (b) The *Code of Ethics of the American Academy of Audiology* as a standard for professional conduct in the State of Nevada for the practice of audiology.
 - (c) The *Code of Ethics of The National Board For Certification In Hearing Instrument Sciences* and *Code of Ethics of the International Hearing Society* as standards for professional conduct in the State of Nevada for the practice of ordering, fitting, and dispensing hearing aids.
2. A copy of the codes of ethics referenced in section 1 may be obtained, free of charge, from the Board by written request.
3. A violation of the provisions of a code of ethics adopted by reference pursuant to this section constitutes cause for disciplinary action.

Added for consideration as modeled in other licensing statutes.

NAC 637B.0442 Delegation of duties by hearing aid specialist or [dispensing] audiologist to unlicensed office assistant, aide or technician. (NRS 637B.132)

1. Except as otherwise provided in this section, a hearing aid specialist[,] or audiologist[, or [dispensing audiologist]] may delegate certain duties to an unlicensed assistant if:
 - (a) The duty being delegated is within the scope of the license [or endorsement] of the hearing aid specialist[,] or audiologist [, or [dispensing audiologist]]; and
 - (b) The hearing aid specialist[,] or audiologist [, or [dispensing audiologist]] determines, before delegating a duty, that the unlicensed assistant possesses the necessary knowledge, competence, training and skills to perform the duty.
2. If a hearing aid specialist[,] or audiologist[, or [dispensing audiologist]] delegates a duty to an unlicensed assistant, the hearing aid specialist[,] or audiologist[, or [dispensing audiologist]] is responsible and civilly liable for any negligence or incompetence of the unlicensed assistant in performing the duty.
3. The duties that may be delegated to an unlicensed assistant pursuant to this section include, without limitation:
 - (a) Cleaning hearing aids and amplification devices;
 - (b) Repairing or replacing a broken part of a hearing aid with the same part;
 - (c) Replacing a thin tube or dome with a similar size or style;
 - (d) Replacing filters;
 - (e) Returning to a client a repaired hearing aid that does not require fitting, programming or adjusting;
 - (f) Accepting an in-office return of a hearing aid if a receipt is provided to the client to document proof of the return;

Removes reference to dispensing AUD per AB177.

- (g) Performing clerical, secretarial and general administrative duties, including, without limitation, providing information that is readily available to the general public;
 - (h) Greeting, escorting and scheduling clients;
 - (i) Packaging and mailing orders of earmolds, repaired devices, and returns to manufacturers or laboratories;
 - (j) Maintaining inventories of supplies and checking the function of equipment;
 - (k) Performing checks on hearing aids and other amplification devices;
 - (l) Performing troubleshooting and minor repairs to hearing aids, earmolds and other amplification devices;
 - (m) Performing electroacoustic analysis of hearing aids and other amplification devices;
 - (n) Demonstrating alerting and assistive listening devices;
 - (o) Verbally instructing a patient in proper ear hygiene;
 - (p) Assisting a hearing aid specialist[, or audiologist[, or [dispensing audiologist] with treatment programs;
 - (q) Assisting a hearing aid specialist[, or audiologist[, or [dispensing audiologist] with setup and technical tasks;
 - (r) Preparing materials for an ear impression;
 - (s) Maintaining and restocking test and treatment rooms;
 - (t) Performing equipment maintenance and biological checks;
 - (u) Performing infection control duties within the clinic;
 - (v) Assisting a client in completing a case history or other relevant forms;
 - (w) Interacting with a manufacturer or supplier of hearing instruments regarding the status of an order or repair; and
 - (x) Translating and interpreting only if the unlicensed assistant is fluent in a language other than English and has the necessary training and skills to perform such translation or interpretation.
4. The following duties that involve direct physical contact with a client or a hearing-related procedure or instrument may be delegated to an unlicensed assistant pursuant to this section:
- (a) Instructing a client in the proper use and care of hearing aids and other amplification devices;
 - (b) Conducting hearing and tympanometric screening on older children and adults without interpretation;
 - (c) Conducting an otoacoustic emission screening;
 - (d) Performing a nondiagnostic otoscopy;
 - (e) Performing a pure-tone audiologic reassessment on an established patient;
 - (f) Preparing a client for electronystagmography and videonystagmography or evoked testing;
 - (g) Assisting a licensed audiologist, dispensing audiologist or hearing aid specialist in testing the hearing of a pediatric client;
 - (h) Performing a pure-tone hearing screening and universal newborn hearing screening test;
5. A hearing aid specialist, audiologist or dispensing audiologist shall not delegate any duty to an unlicensed assistant pursuant to this section that requires professional or advanced training for the practice of audiology or fitting and dispensing hearing aids. Duties that may not be delegated pursuant to this section include, without limitation:
- (a) Removing a hearing aid from or placing a hearing aid into a client's ear;

- (b) Programming, adjusting or fitting a hearing aid;
- (c) Conducting an interview, examination or evaluation relating to a client's hearing or hearing loss;
- (d) Except for the duties that may be delegated to an unlicensed assistant pursuant to subsection 4, conducting any activity involving direct physical contact with a client and a hearing-related procedure or instrument;
- (e) Determining case selection or evaluation protocols;
- (f) Interpreting observations or data into a diagnostic statement of a clinical management strategy or procedure;
- (g) Participating in a team or case conference or on any interdisciplinary team without the presence of a supervising audiologist or an audiologist designated by the supervising audiologist;
- (h) Writing, developing or modifying a client's individualized treatment plan;
- (i) Assisting a client without following the treatment plan prepared by the respective hearing aid specialist[,] or audiologist[, or [dispensing audiologist] without proper supervision;
- (j) Composing or signing any formal document such as a treatment plan, reimbursement form, progress note or other report, as applicable;
- (k) Transmitting or disclosing clinical information, either orally or in writing, to anyone, including the client, without the approval of the supervising hearing aid specialist[,] or audiologist[, or [dispensing audiologist];
- (l) Selecting a client for treatment services or discharging a client from treatment services;
- (m) Counseling or consulting with a client, a family member of a client or others regarding the client's status or treatment services or making referrals for additional services; and
- (n) An unlicensed assistant referring to himself or herself, either orally or in writing, with a title other than one designated by the supervising hearing aid specialist[,] or audiologist[, or [dispensing audiologist].

NAC 637B.0446 Case history and minimum procedures required for prospective candidate for hearing aid; exception. (NRS 637B.132)

1. Except as otherwise provided in subsection 3, a hearing aid specialist or [dispensing] audiologist shall take the pertinent case history of, and perform personally the following minimum procedures bilaterally on, each prospective candidate for a hearing aid:
 - (a) Pure-tone audiometry, including air-conduction testing and bone-conduction testing through an annually calibrated system.
 - (b) Live voice audiometry, only if a separate sound-treated room is available, or recorded voice audiometry, including speech-reception threshold testing, most comfortable and uncomfortable level testing, and speech discrimination testing presented through a speech audiometer.
 - (c) When applicable, effective masking.
 - (d) Before a hearing test and an ear impression is performed, an otoscopic examination of the ear canal in which the tympanic membrane is visualized.
 - (e) After an ear impression is performed, an otoscopic examination in which the tympanic membrane is visualized.
2. A hearing aid specialist or [dispensing] audiologist shall perform each procedure set forth in subsection 1 in a proper environment to obtain accurate results.

Removes reference to dispensing AUD per AB177.

3. The minimum procedures set forth in subsection 1 are not required if the person supplies the hearing aid specialist or [dispensing] audiologist with complete results of the required tests which have been given within the immediately preceding 6 months by a qualified tester who is licensed pursuant to the provisions of this chapter and chapter 637B of NRS.

NAC 637B.0448 Duties of hearing aid specialist or [dispensing] audiologist concerning hearing aid he or she sells or fits. (NRS 637B.132)

A hearing aid specialist or [dispensing] audiologist shall:

1. Provide for the service and repair of each hearing aid he or she sells or fits.
2. Provide to each person who orders or purchases a hearing aid from the hearing aid specialist or [dispensing] audiologist a bill of sale that includes:
 - (a) The name of the hearing aid specialist or dispensing audiologist, the address of the principal place of business of the hearing aid specialist or [dispensing] audiologist and the number of the license of the hearing aid specialist or [dispensing] audiologist;
 - (b) A description of the make, model and serial number of the hearing aid;
 - (c) The amount charged for the hearing aid and, if applicable, an itemization of any amount to be deducted from any refund;
 - (d) The condition of the hearing aid, indicating whether it is new, used or reconditioned;
 - (e) Any accessories provided with the hearing aid;
 - (f) The name of the person or entity responsible for providing a refund; and
 - (g) The manner in which a hearing aid may be returned, including the business location where the hearing aid may be returned and the business hours during which the hearing aid may be returned.
3. Provide to each person who purchases a hearing aid from the hearing aid specialist or dispensing audiologist a written guarantee that the person may return the hearing aid:
 - (a) Within 30 days after receipt of the hearing aid; or
 - (b) If the hearing aid is returned to the manufacturer for service or repair during the 30-day period, within 30 days after the hearing aid is returned to the possession of the person who purchased the hearing aid.
4. Schedule at least one appointment with each person who purchases a hearing aid from the hearing aid specialist or [dispensing] audiologist. The appointment must take place not later than 21 days after the hearing aid is delivered to the person.
5. Within 30 days after a hearing aid and all accessories that accompanied the hearing aid are returned in the same condition as that in which they were received, provide a refund to the person who purchased the hearing aid from the hearing aid specialist or [dispensing] audiologist.

Removes reference to dispensing AUD per AB177.

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 NRS 629.051. As used in this subsection, "health care records" has the meaning ascribed to it in NRS 629.021.

Removes reference to dispensing AUD per AB177.

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

NAC 637B.046 Grounds for disciplinary action: Unprofessional conduct. (NRS 637B.132, 637B.250)

1. A violation of any provision of this chapter by a licensee constitutes unprofessional conduct and subjects the licensee to disciplinary action by the Board.
2. If a licensee violates any provision of this chapter or engages in any other kind of unprofessional conduct while his or her license is in effect, the Board will take disciplinary action against the licensee, including, without limitation, taking action against the licensee after his or her license has expired or been suspended.
3. If a board or entity in this State or in another state which has issued a license, certificate, registration or other credential to a licensee for the practice of audiology, speech-language pathology or fitting and dispensing hearing aids or a related field revokes or suspends the license, certificate, registration or other credential, or takes any other disciplinary action against the licensee, the revocation, suspension or disciplinary action is a ground for disciplinary action by the Board against the licensee for unprofessional conduct.
4. The failure of a licensee to comply with a stipulation, agreement, advisory opinion or order issued by the Board constitutes unprofessional conduct and is a ground for disciplinary action by the Board against the licensee.
5. In addition to the acts specified in this section and subsection 2 of NRS 637B.250, the following acts constitute unprofessional conduct and are grounds for disciplinary action by the Board against a licensee or an applicant for a license, as applicable:
 - (a) Engaging in the practice of audiology, speech-language pathology or fitting and dispensing hearing aids when unable to do so with reasonable skill and safety to a client because of the use of alcohol or any controlled substance or any mental or physical condition or illness.
 - (b) Committing negligence in the practice of audiology, speech-language pathology or fitting and dispensing hearing aids.
 - (c) Allowing another person to use the license issued to the licensee.
 - (d) Failing to report or otherwise concealing information relating to a violation of this chapter or chapter 637B of NRS that could result in harm to the public health and welfare.
 - (e) Intentionally making or filing a false or misleading report.

- (f) Failing to file or intentionally obstructing or attempting to obstruct another person from filing a report required by law or a third person.
- (g) Intentionally harassing, abusing or intimidating a client, employer, employee, colleague or other person, either physically or verbally, including, without limitation, committing sexual harassment.
- (h) Failing to notify the Board of disciplinary action imposed upon the licensee or the applicant for a license by a regulatory authority in another jurisdiction.
- (i) Divulging, without the consent of a client, information gained within the context of the professional relationship with the client, unless the divulging of such information is otherwise required by law.
- (j) Failing to obtain the informed consent of a client before engaging in scientific research involving the client.
- (k) Referring or appearing to refer a client to a third person in exchange for receiving a fee or other consideration from the third person.
- (l) Advertising in a manner that tends to deceive or mislead the public, including, without limitation, making a false or misleading statement or representation in the advertisement or solicitation of services.
- (m) Making or providing false statements or omitting relevant information in connection with an application for a license or the renewal of a license.
- (n) Misrepresenting or falsifying credentials, including, without limitation, credentials relating to education, training, experience or areas of competency.
- (o) Practicing or offering to practice beyond the scope required by law.
- (p) Performing any professional service that the licensee knows he or she is not competent to perform.
- (q) Knowingly advertising a model or type of hearing aid for sale that cannot be purchased by a member of the general public.
- (r) Advertising a product or using a name or trademark in a manner that falsely implies the existence of a relationship between the licensee and the manufacturer of a product.

NAC 637B.048 Grounds for disciplinary action: “Professional incompetence” interpreted. (NRS 637B.132, 637B.250)

1. For the purposes of paragraph (d) of subsection 1 of NRS 637B.250, the Board will interpret the term “professional incompetence” to mean a lack of knowledge, skill or ability in discharging a professional obligation and to include, without limitation, malpractice and gross negligence.
2. As used in this section:
 - (a) “Gross negligence” means conduct in the practice of audiology, speech-language pathology or fitting and dispensing hearing aids which represents an extreme departure from the standard of care required from an audiologist, speech-language pathologist or hearing aid specialist under the circumstances.
 - (b) “Malpractice” means conduct in the practice of audiology, speech-language pathology or fitting and dispensing hearing aids which falls below the standard of care required from an audiologist, speech-language pathologist or hearing aid specialist under the circumstances.

CONTINUING EDUCATION

NAC 637B.400 Requirements for renewal of standard or provisional license; records; audits; excess credits may not be carried forward. (NRS 637B.132, 637B.191)

1. Except as otherwise provided in subsection 2 of NAC 637B.403 and NAC 637B.430, as a prerequisite for each renewal of a standard license or provisional license, a licensee must complete, during the annual period immediately preceding the renewal, at least 10 hours of continuing education approved by the Board that directly pertains to the profession in which he or she holds a license issued by the Board, including at least 1 hour of continuing education relating to ethics, cultural competence, cultural humility, culturally responsive practices or diversity, equity and inclusion. If the licensee is an **[dispensing]** audiologist, at least 3 of the 10 hours of continuing education must directly relate to the practice of fitting and dispensing hearing aids **if they have engaged in the practice in the prior 12 months or intend to engage in the practice in the upcoming 12 months.**
2. Legible copies of all receipts, records of attendance, certificates and any other evidence of a licensee's completion of a course of continuing education must be retained by the licensee and made available to the Board for inspection for not less than 3 years after the completion of the course.
3. The Board will conduct random audits of licensees to ensure compliance with the requirements of this section.
4. If a licensee completes more than the required number of hours of continuing education during one licensing period, the licensee is not allowed to credit the excess hours toward the required education for a subsequent period.
5. For the purposes of subsection 1, a course approved by the International Institute for Hearing Instruments Studies of the International Hearing Society, American Academy of Audiology, American Speech-Language-Hearing Association, Academy of Doctors of Audiology or Educational Audiology Association is deemed to be approved by the Board.

Removes reference to dispensing AUD per AB177.

NAC 637B.403 Requirements for holder of standard or provisional license; exception for first renewal of license. (NRS 637B.132, 637B.191)

1. Except as otherwise provided in subsection 2 and NAC 637B.430, a licensee who holds a standard license or provisional license shall complete continuing education in accordance with the provisions of NAC 637B.400.
2. A person who obtains a standard license or provisional license within 12 months after graduating from an educational program accredited by an agency approved by the Board is not required to complete any continuing education before renewing his or her license for the first time.

NAC 637B.420 Acceptable activities, courses, seminars, workshops and similar functions; limitations on credit; written request for approval of other continuing education. (NRS 637B.132, 637B.191)

1. In addition to any course deemed to be approved by the Board pursuant to subsection 5 of NAC 637B.400, the Board will accept the following kinds of activities for credit toward fulfilling its requirement for continuing education:
 - (a) Attendance at a course or program conducted by a university, school district, hospital or similar entity.
 - (b) Attendance at a workshop, seminar, demonstration, meeting or lecture.

- (c) Making a presentation at a workshop, seminar or similar function. Credit is allowed for time spent on both preparation and presentation. The greatest number of hours allowed for presentation is 8 hours during any one licensing period. Credit claimed for preparation may not exceed 50 percent of the number of hours credited for presentation.
 - (d) Publication of material in a professional journal or equivalent periodical or work. The Board will determine the number of hours allowed for credit under this paragraph, but the greatest number of hours allowed is 8 hours during any one licensing period.
 - (e) Participation in a planned observation or visit which is part of a clinical program if prior written approval for the activity is obtained from the Board.
 - (f) Completion of an Internet course.
2. The Board will consider a written request from a licensee that the Board approve credit for any continuing education not specified in subsection 1 if the request is submitted to the Board before the date of renewal of the license.
 3. If a written request submitted pursuant to subsection 2 is not granted, the Board may grant additional time for the licensee to fulfill any required continuing education that he or she has not completed.

NAC 637B.430 Waiver of requirements; additional time for completion if waiver not granted. (NRS 637B.132, 637B.191)

1. The Board may waive all or part of the requirements for continuing education for a licensee who holds a standard license or provisional license if the licensee:
 - (a) Submits a written request for a waiver; and
 - (b) Provides proof satisfactory to the Board of an extenuating circumstance that does not allow the completion of the required continuing education.
2. If a waiver is granted pursuant to this section, the unfulfilled requirements for continuing education will be added to the requirements for continuing education for the licensee for the following year.
3. If a waiver is not granted pursuant to this section, the Board may grant additional time for the licensee to fulfill any required continuing education that he or she has not completed.
4. As used in this section, "extenuating circumstance" includes, without limitation:
 - (a) Extreme illness or injury;
 - (b) Extreme financial or familial hardship; or
 - (c) Military service.

PRACTICE BEFORE THE BOARD

NAC 637B.705 Board authorized to act on own motion; petition to request adoption, amendment or repeal of regulation or for formal hearing; contents and filing of petition. (NRS 637B.132)

1. The Board may act on its own motion. Any other request for the adoption, amendment or repeal of a regulation of the Board or for a formal hearing by the Board must be submitted to the Board as a petition.
2. Any interested person may submit a petition to the Board for the adoption, amendment or repeal of a regulation of the Board or for a formal hearing by the Board.
3. The petition must be in writing and addressed to the Chair of the Board.
4. An original and two legible copies of the petition must be filed with the Board. The Board may, when appropriate, direct that a copy of each petition be made available to any other person who the Board determines may be affected by the petition.
5. The petition must contain:
 - (a) The full name and mailing address of the petitioner;
 - (b) If the adoption of a new regulation is proposed, the body or substance of the proposed regulation and the supporting facts and arguments;
 - (c) If the amendment or repeal of an existing regulation is proposed, the specific section of the Nevada Administrative Code that the petitioner is proposing to amend or repeal and the supporting facts and arguments for the amendment or repeal thereof;
 - (d) If a formal hearing by the Board is requested, the relevant facts which support the request; and
 - (e) A statement that the petition is made in accordance with the applicable provisions of the Nevada Revised Statutes.
6. The petition must be signed by the petitioner. The signature constitutes a representation by the signer that:
 - (a) He or she has read the petition; and
 - (b) To the best of his or her knowledge, information and belief, the statements made therein are true.

NAC 637B.710 Petition for declaratory order or advisory opinion: Submission. (NRS 637B.132)

1. The Board will consider petitions for declaratory orders or advisory opinions as to the applicability of any statutory provision or any regulation or decision of the Board.
2. A petition for a declaratory order or an advisory opinion must be in writing and submitted in the same manner as a petition for the adoption, amendment or repeal of a regulation by the Board.

NAC 637B.715 Petition for declaratory order or advisory opinion: Meeting and decision by Board; service of denial and other correspondence. (NRS 637B.132)

1. Upon submission of a petition for a declaratory order or an advisory opinion, the Board will, within 90 days:
 - (a) Schedule a meeting to discuss and grant or deny the petition in writing, stating its reasons; or
 - (b) Initiate proceedings for adoption of an appropriate regulation.
2. A copy of any denial or other correspondence from the Board to the petitioner will be served by mailing a copy thereof to the petitioner.

NAC 637B.720 Filing or initiation of complaint against licensee; contents; review; complaint filed against apprentice. (NRS 637B.132)

1. Any person who believes that another person licensed by the Board has violated a provision of this chapter or chapter 637B of NRS may file a complaint with the Board on a form provided by the Board.
2. The Board may, on its own, initiate a complaint against a person licensed by the Board.
3. A complaint must, without limitation:
 - (a) Identify one or more grounds for disciplinary action; and
 - (b) Contain a statement of facts in sufficient detail to enable the Board to understand the allegations.
4. The Executive Director of the Board, in consultation with legal counsel, shall review each complaint and decide if the complaint merits an investigation.
5. The Executive Director of the Board shall bring before the Board any complaint found to have merit.
6. For any proceedings regarding a complaint filed against an apprentice **or speech-language pathology assistant or provisional licensee**, the Board may require that the **apprentice, assistant, or provisional licensee** be accompanied by any hearing aid specialist, **[or dispensing]** audiologist, **or supervising speech-language pathologist** who signed, dated or reviewed a record regarding a patient related to the complaint.

- Removes reference to dispensing AUD per AB177.
- Adds SLP Assistants

NAC 637B.730 Conduct of hearing in contested case. (NRS 637B.132)

1. Each hearing of a contested case will be conducted in accordance with the provisions of this chapter and chapter 233B of NRS and, if the hearing concerns a disciplinary proceeding, chapter 622A of NRS and NRS 637B.250 to 637B.288, inclusive.
2. As used in this section, "contested case" has the meaning ascribed to it in NRS 233B.032.

NAC 637B.735 Recovery of attorney's fees and costs. (NRS 637B.132)

Pursuant to NRS 622.400, the Board may recover from a person reasonable attorney's fees and costs relating to any disciplinary proceedings involving the person.

NAC 637B.740 Fees and reimbursement for mileage for witnesses. (NRS 637B.132)

A witness who participates in a proceeding held by the Board is entitled to receive fees and reimbursement for mileage in the same amounts and under the same conditions as for witnesses in the courts of this State.



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

AGENDA ITEM 8

Executive Director's Report

Please see the Written Executive Director's Report.

Attachments on next page:

1. *ED Report 4 22 2025*
2. *FY25 Q3 Financial Reports*

Action: Approve, Table, or Take No Action on the Matter



State of Nevada

Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board

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(775) 787-3421 / Fax (775) 746-4105

www.nvspeechhearing.org Email board@nvspeechhearing.org**EXECUTIVE DIRECTOR'S REPORT**

April 22, 2025

a. Licensure Statistics

The following chart provides licensing statistics for the period January 1, 2025 through March 31, 2025 with a net decrease of 21 licenses), a -1% change from the prior quarter. This increase is consistent with prior Q3 numbers, as this is a slow time for new licensing and also includes licenses expiring on 12/31 each year, which was the standard expiration date prior to the Board merger in 2015 when rolling expiration dates were instituted. As of 4/1/2025, 31% (524 or 1,680) licenses expire on 12/31. Several of the licenses that expired on 12/31/2024 were among the earliest issued to SLPs and Audiologists in Nevada.

Description	Total Licensees	Speech Pathologists	Audiologists	Dispensing Audiologists	Hearing Aid Specialists	Apprentices
Dec 31, 2024	1,701	1,409	70	115	90	17
Issued	40	33	0	2	3	2
Expired	61	46	7	2	3	3
Mar 31, 2025	1,680	1,396	63	115	90	16
Net Change	-21	-13	-7	0	0	-1
	-1%	-1%	-10%	0%	0%	-6%

b. FY25 Q3 Financial Report

The FY25 Q3 Financial Summary is attached for review, with income lower than budgeted at 72.92% and expenses lower than anticipated at 69.01%. Compared to prior Q3 totals, income is consistent, as Q3 sees fewer new licenses than Q1 and Q4. Expenses are somewhat lower than prior years, which may be attributed to minimal billing to date for legal fees, and fewer examination costs to date. Net income resulted in a negative -\$19,924.87, but this is expected given the planned deficit budget which is expected to result in a \$35,000 deficit this fiscal year.

Profit and Loss Through Q3

- Total Revenue: \$159,693.34 Percent of Budget: 72.92%
- Deferred Revenue: \$92,313.84
- Total Expenses: \$176,447.21 Percent of Budget: 69.01%
- **Net Income:** -\$19,924.87

FY25 Q3 Balance Sheet

- Total Cash Assets: \$208,564.43
- Total Liabilities: \$137,599.79
- **Total Equity:** \$102,541.77

FY25 Q3 Deviations from Budget**Lower than Budgeted**

- **Examinations 62.62% of budget:** Likely due to fewer examinations than anticipated and/or higher number of examinations to occur in Q4 to coincide with graduations.

- **Legal Fees 24.38% of budget:** The AG's office has experienced billing delays, and the most recent bill received covered September 2024.
- **Office Supplies 24.74% of budget:** Due to the QuickBooks change discussed in 2024, \$1,836 was budgeted for new software fees, however the final cost-share only totaled \$316.58 resulting in a budget savings of almost \$1,500.

Higher than Budgeted

- **Bank Service Charges 78.21% of budget:** These fees are not over budget by much, but have been steadily increasing over the last few years, and we were just informed of an upcoming increase of \$0.113 per transaction.
- **Database 120.44% of budget:** Historically this expense has always been billed in the middle of the fiscal year, so the payment made covers both FY25 and FY26. The FY25 total will be adjusted at the end of the fiscal year by decreasing the expense by \$6,282 and adding a depreciation expense totaling \$7,158. The line item will land under budget but there will be an unbudgeted amount for amortization of the licensing asset.
- **Dues 79.55% of budget:** All payments have been made but cover the entire year and will be adjusted in Q4.
- **Insurance 102.28% of budget:** Over budget due to a temporary "surplus contribution charge" of \$120 assessed by the Nevada Retail Network to address its operating cost increases, resulting in a \$720 (vs. \$600) Worker's Compensation insurance bill. All insurance payments have been made for the year so this should not increase further
- **Postage 82.76% of budget:** Higher than budgeted due to increase costs to mail & return practical dispensing exam materials. Staff have requested to borrow or purchase additional kits but IHS is unable to provide them at this time.
- **Travel 703.75% of budget:** Increased due to previously unplanned April 2025 in-person meeting & Legislative visit.

c. Board Member Appointments/Reappointments & Welcome New Member

Name	Credential/Role	Location	Term	Term Expires	Eligible for Reappointment
Timothy Hunsaker	AuD-D/Board Vice Chair	Las Vegas	2	7/1/2025	No
Lynee Anderson	BC-HIS	Reno	2	7/1/2027	No
Shawn Binn	SLP	Reno	1	9/30/2026	Yes
Jennifer Joy-Cornejo	AuD-D	Las Vegas	1	9/30/2026	Yes
Branden Murphy	Public Member	Las Vegas	1	11/30/2026	Yes
Adrienne Williams	SLP	Las Vegas	1	7/1/2025	Yes
Vacant	SLP				

- Timothy Hunsaker's second term expires this summer, and he is not eligible for reappointment.
- Adrienne Williams' second term expires this July, and she may apply for reappointment.
- No further updates have been received from the Governor's Office regarding our vacant SLP seat, and it is unclear how this and Tim's vacancy will be addressed if SB78 is passed.

d. Complaints

There was **one** open complaint case following the January 2025 meeting, and **two** new complaints received to date. **One open** case is scheduled to be heard in this meeting for the Board's approval of a Consent Decree and if approved, **two open cases** will remain.

The Board received **one** report of unlicensed practice since the January 2025 meeting and this matter was referred to a more appropriate entity.

Balance Sheet
As of March 31, 2025

	Mar 31, 2025
ASSETS	
Current Assets	
Checking/Savings	
Wells Fargo Bank - Checking	105,586.32
Wells Fargo Bank - Savings	102,978.11
Total Checking/Savings	208,564.43
Other Current Assets	
Accounts Receivable	0.00
Prepaid Expenses	1,105.15
Total Other Current Assets	1,105.15
Fixed Assets	
Capital Assets	1,840.98
Subscription Asset	28,631.00
Total Fixed Assets	30,471.98
TOTAL ASSETS	240,141.56
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable	0.00
Total Accounts Payable	0.00
Other Current Liabilities	
Deferred Revenue	92,313.84
Other Current Liabilities	6,282.00
Paid Time Off	12,931.40
Payroll Liabilities	3,475.45
Payroll Tax Liability	248.10
Total Other Current Liabilities	115,250.79
Total Current Liabilities	115,250.79
Long Term Liabilities	
Subscription Liability	22,349.00
Total Long Term Liabilities	22,349.00
Total Liabilities	137,599.79
Equity	
Invested in Capital Assets	1,840.98
Retained Earnings	117,454.66
Net Income	-16,753.87
Total Equity	102,541.77
TOTAL LIABILITIES & EQUITY	240,141.56

Profit Loss Budget vs. Actual
July 2024 through March 2025

	Approved Budget	Actuals July 24 - March 25	Remaining Balance	% of Budget Spent
Ordinary Income/Expense				
Income				
Fees	41,832.00	19,500.00	22,332.00	46.62%
License Fees	167,122.80	132,476.27	34,646.53	79.27%
Fines	0.00	150.00	-150.00	100.00%
Exams, List and Interest	10,050.42	7,567.07	2,483.35	75.29%
Total Income	219,005.22	159,693.34	59,311.88	72.92%
Expense				
Personnel Cost	164,602.96	120,237.79	44,365.17	73.05%
Attorney General / Legal Fees	8,000.00	1,950.19	6,049.81	24.38%
Audit Fees	10,000.00	0.00	10,000.00	0.00%
Bank Service Charges	4,600.00	3,597.72	1,002.28	78.21%
Board Compensation	3,525.00	2,625.00	900.00	74.47%
Dues	550.00	437.50	112.50	79.55%
Equipment Purchase	500.00	0.00	500.00	0.00%
Examinations	4,840.00	3,030.59	1,809.41	62.62%
Insurance	1,700.00	1,738.76	-38.76	102.28%
Licensing Program Subscription	8,855.00	10,665.00	-1,810.00	120.44%
Meeting Expenses	100.00	0.00	100.00	0.00%
Office Lease	3,400.00	2,302.83	1,097.17	67.73%
Office Supplies	2,586.00	639.66	1,946.34	24.74%
Postage	400.00	331.02	68.98	82.76%
Printing	200.00	0.00	200.00	0.00%
Professional Fees				
Investigation Fees	1,000.00	0.00	1,000.00	0.00%
Accounting	3,600.00	3,016.58	583.42	83.79%
Lobbyist	36,000.00	24,000.00	12,000.00	66.67%
IT / Technical Support	500.00	0.00	500.00	0.00%
Total Professional Fees	41,100.00	27,016.58	14,083.42	65.73%
Telephone	525.00	467.08	57.92	88.97%
Travel				
In-state Travel	200.00	1,407.49	-1,207.49	703.75%
Out of State Travel	0.00	0.00	0.00	0.00%
Total Travel	200.00	1,407.49	-1,207.49	703.75%
Total Expense	255,683.96	176,447.21	79,236.75	69.01%
Net Ordinary Income	-36,678.74	-16,753.87	-19,924.87	45.68%
Net Income	-36,678.74	-16,753.87	-19,924.87	45.68%

Transaction Detail by Account

January through March 2025

Type	Date	Num	Name	Memo	Amount
Wells Fargo Bank - Checking					
Deposit	01/01/2025			Deposit	1,400.00
Paycheck	01/02/2025	DD1373	Jennifer Pierce	Payroll expense	0.00
Paycheck	01/02/2025	DD1375	Stacey Whittaker	Payroll expense	0.00
Check	01/02/2025	ACH	Voya	Payroll expense	-401.60
Deposit	01/02/2025			Deposit	150.00
Deposit	01/03/2025			Deposit	225.00
Deposit	01/04/2025			Deposit	375.00
Deposit	01/05/2025			Deposit	100.00
Check	01/06/2025	1865	Strategies 360	Lobbyist	-3,000.00
Check	01/06/2025	1866	Numbers, Inc.	Bookkeeping services	-900.00
Deposit	01/06/2025			Deposit	950.00
Deposit	01/07/2025			Deposit	925.00
Check	01/08/2025		AT&T	Telephone expense	-28.52
Check	01/08/2025	1867	Board of Occupational Therapy	Postage reimbursement	-154.90
Deposit	01/08/2025			Deposit	675.00
Deposit	01/09/2025			Deposit	500.00
Deposit	01/10/2025			Deposit	150.00
Deposit	01/11/2025			Deposit	100.00
Deposit	01/12/2025			Deposit	200.00
Check	01/13/2025			Merchant fees	-777.97
Deposit	01/13/2025			Deposit	250.00
Deposit	01/14/2025			Deposit	700.00
Liability Check	01/15/2025		QuickBooks Payroll Service	Payroll expense	-4,346.70
Check	01/15/2025	ACH	Adrienne Williams	Board compensation	-75.00
Check	01/15/2025	ACH	Branden Murphy	Board compensation	-75.00
Check	01/15/2025	ACH	Branden Murphy	Board compensation	-75.00
Deposit	01/15/2025			Deposit	625.00
Paycheck	01/16/2025	DD1376	Jennifer Pierce	Direct Deposit	0.00
Paycheck	01/16/2025	DD1377	Stacey Whittaker	Direct Deposit	0.00
Check	01/16/2025		Voya	Payroll expense	-401.60
Deposit	01/16/2025			Deposit	325.00
Deposit	01/18/2025			Deposit	300.00
Deposit	01/19/2025			Deposit	500.00
Deposit	01/20/2025			Deposit	50.00
Check	01/21/2025	1868	Michael Hodes	Exam proctor	-100.00
Deposit	01/21/2025			Deposit	375.00
Deposit	01/22/2025			Deposit	550.00
Check	01/23/2025	ACH	Tim Hunsaker	Board compensation	-75.00
Check	01/23/2025	ACH	Adrienne Williams	Board compensation	-75.00
Check	01/23/2025	ACH	Lynee Anderson V	Board compensation	-75.00
Check	01/23/2025	ACH	Jennifer Joy-Cornejo	Board compensation	-75.00
Check	01/23/2025	ACH	Shawn Binn	Board compensation	-75.00
Deposit	01/24/2025			Deposit	375.00

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Transaction Detail by Account
January through March 2025

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Deposit	01/25/2025		Deposit	25.00
Check	01/27/2025	Wells Fargo	Albertson Consulting annual fee, USF	-8,024.28
Deposit	01/27/2025		Deposit	325.00
Deposit	01/28/2025		Deposit	375.00
Liability Check	01/29/2025	QuickBooks Payroll Service	Payroll expense	-4,346.70
Deposit	01/29/2025		Deposit	350.00
Paycheck	01/30/2025	DD1378 Jennifer Pierce	Direct Deposit	0.00
Paycheck	01/30/2025	DD1379 Stacey Whittaker	Direct Deposit	0.00
Check	01/30/2025	Voya	Payroll expense	-401.60
Deposit	01/30/2025		Deposit	425.00
Liability Check	01/31/2025	E-pay US Treasury	Payroll expense	-4,491.72
Deposit	01/31/2025		Deposit	300.00
Deposit	01/31/2025		Interest	1.16
Deposit	02/01/2025		Deposit	100.00
Deposit	02/02/2025		Deposit	100.00
Deposit	02/03/2025		Deposit	300.00
Check	02/03/2025	1870 Strategies 360	Lobbyist services	-3,000.00
Deposit	02/04/2025		Deposit	100.00
Deposit	02/05/2025		Deposit	875.00
Deposit	02/06/2025		Deposit	450.00
Check	02/06/2025	ACH AT&T	Telephone expense	-30.34
Check	02/06/2025	ACH Nevada Retail Network	Worker's comp 2025	-720.00
Deposit	02/07/2025		Deposit	300.00
Deposit	02/08/2025		Deposit	200.00
Deposit	02/09/2025		Deposit	400.00
Deposit	02/10/2025		Deposit	500.00
Check	02/10/2025	ACH Shawn Binn	Board comp (Jan)	-75.00
Deposit	02/10/2025		Deposit	75.00
Deposit	02/11/2025		Deposit	200.00
Liability Check	02/12/2025	QuickBooks Payroll Service	Payroll expense	-4,346.70
Deposit	02/12/2025		Deposit	100.00
Check	02/12/2025	ACH Wells Fargo	Merchant fees	-341.10
Paycheck	02/13/2025	DD1381 Stacey Whittaker	Payroll expense	0.00
Paycheck	02/13/2025	DD1380 Jennifer Pierce	Payroll expense	0.00
Check	02/13/2025	Voya	Payroll expense	-401.60
Deposit	02/13/2025		Deposit	900.00
Deposit	02/15/2025		Deposit	450.00
Deposit	02/17/2025		Deposit	100.00
Deposit	02/18/2025		Deposit	625.00
Deposit	02/19/2025		Deposit	600.00
Deposit	02/20/2025		Deposit	125.00
Deposit	02/21/2025		Deposit	700.00
Deposit	02/23/2025		Deposit	200.00
Deposit	02/24/2025		Deposit	225.00
Deposit	02/25/2025		Deposit	825.00

Transaction Detail by Account

January through March 2025

Check	02/25/2025	ACH	Melissa Maestas	Exam proctor	-100.00
Liability Check	02/26/2025		QuickBooks Payroll Service	Payroll expense	-4,346.70
Deposit	02/26/2025			Deposit	125.00
Check	02/26/2025	ACH	Tim Hunsaker	Board comp	-150.00
Check	02/26/2025	ACH	Adrienne Williams	Board comp	-150.00
Check	02/26/2025	ACH	Lynee Anderson V	Board comp	-150.00
Paycheck	02/27/2025	DD1382	Jennifer Pierce	Payroll expense	0.00
Paycheck	02/27/2025	DD1383	Stacey Whittaker	Payroll expense	0.00
Check	02/27/2025	ACH	Voya	Payroll expense	-401.60
Deposit	02/27/2025			Deposit	400.00
Liability Check	02/28/2025	E-pay	US Treasury	Payroll expense	-2,994.48
Deposit	02/28/2025			Deposit	750.00
Deposit	02/28/2025			Interest	0.92
Deposit	03/01/2025			Deposit	200.00
Deposit	03/03/2025			Deposit	500.00
Check	03/03/2025	1871	Strategies 360	Legislative services	-3,000.00
Check	03/03/2025	1872	Michael Hodes	Exam proctor	-100.00
Deposit	03/04/2025			Deposit	425.00
Deposit	03/05/2025			Deposit	375.00
Deposit	03/05/2025			Deposit	175.00
Deposit	03/06/2025			Deposit	1,400.00
Check	03/06/2025		AT&T	Telephone expense	-29.43
Deposit	03/07/2025			Deposit	500.00
Deposit	03/10/2025			Deposit	200.00
Deposit	03/11/2025			Deposit	100.00
Liability Check	03/12/2025		QuickBooks Payroll Service	Payroll expense	-4,388.64
Deposit	03/12/2025			Deposit	500.00
Check	03/12/2025		Wells Fargo	Merchant fees	-233.54
Paycheck	03/13/2025	DD1386	Thomas D Sharkey	Payroll expense	0.00
Paycheck	03/13/2025	DD1384	Jennifer Pierce	Payroll expense	0.00
Paycheck	03/13/2025	DD1385	Stacey Whittaker	Payroll expense	0.00
Check	03/13/2025	ACH	Voya	Payroll expense	-401.60
Deposit	03/13/2025			Deposit	100.00
Deposit	03/14/2025			Deposit	500.00
Deposit	03/16/2025			Deposit	175.00
Deposit	03/17/2025			Deposit	100.00
Check	03/17/2025	1873	Numbers, Inc.	Payroll system cost share	-316.58
Check	03/17/2025	1874	Nanci Campbell	Exam proctor	-100.00
Deposit	03/18/2025			Deposit	100.00
Deposit	03/19/2025			Deposit	225.00
Deposit	03/20/2025			Deposit	-200.00
Deposit	03/21/2025			Deposit	300.00
Deposit	03/22/2025			Deposit	125.00
Deposit	03/23/2025			Deposit	100.00
Deposit	03/24/2025			Deposit	400.00

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Transaction Detail by Account
January through March 2025

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Deposit	03/25/2025		Deposit	525.00
Liability Check	03/26/2025	QuickBooks Payroll Service	Payroll expense	-4,346.70
Deposit	03/26/2025		Deposit	250.00
Check	03/26/2025	Wells Fargo	SWA - board meeting, USPS	-739.70
Paycheck	03/27/2025	DD1388 Stacey Whittaker	Payroll expense	0.00
Paycheck	03/27/2025	DD1387 Jennifer Pierce	Payroll expense	0.00
Liability Check	03/27/2025	E-pay US Treasury	Payroll expense	-3,000.60
Check	03/27/2025	Voya	Payroll expense	-401.60
Deposit	03/27/2025		Deposit	700.00
Check	03/27/2025	ACH Tim Hunsaker	Board compensation	-75.00
Check	03/27/2025	ACH Adrienne Williams	Board compensation	-75.00
Check	03/27/2025	ACH Branden Murphy	Board compensation	-75.00
Check	03/27/2025	ACH Lynee Anderson V	Board compensation	-75.00
Check	03/27/2025	ACH Jennifer Joy-Cornejo	Board compensation	-75.00
Check	03/27/2025	ACH Shawn Binn	Board compensation	-75.00
Deposit	03/28/2025		Deposit	25.00
Deposit	03/29/2025		Deposit	250.00
Deposit	03/31/2025		Deposit	550.00
Check	03/31/2025	ACH Adrienne Williams	Travel reimbursement	-677.47
Deposit	03/31/2025		Interest	0.96
Total Wells Fargo Bank - Checking				-33,440.93
TOTAL				-33,440.93



State of Nevada

Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board

AGENDA ITEM 9

Review and Approval of Revised FY25 Budget and Proposed FY26 Budget

The revised FY25 and proposed FY26 budgets are presented for the Board's review and approval.

Attachments on next page: *FY25 Revised and FY26 Proposed Budgets 4 22 2025*

Action: Approve, Table, or Take No Action on the Matter

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

FY26 BUDGET | FOR REVIEW 4/22/2025

REVENUE		FY24 ACTUAL	FY25 APPROVED (4/24/2024)	FY25 REVISED (4/22/2025)	FY26 PROPOSED (4/22/2025)	
Fees	New apps; late renewals	\$ 37,750.00	\$ 41,832.00	\$ 41,832.00	\$ 41,832.00	Same as FY25 - Unclear how compact + SLPA licensing might increase - leaving as-is for now.
License Fees	New; renewals; reinstate; conversions	\$ 168,311.92	\$ 167,122.80	\$ 167,122.80	\$ 167,122.80	Same as FY25 - Unclear how compact + SLPA licensing might increase - leaving as-is for now.
Fines	Legal Fees	\$ 7,603.36	-	-	-	None estimated as unable to predict and will be offset by expenses below.
Exams, List, Interest	Exams; lists; verifications; interest	\$ 7,538.55	\$ 10,050.42	\$ 10,050.42	\$ 10,050.42	Same as FY25 - Unclear how compact + SLPA licensing might increase - leaving as-is for now.
Total Revenue		\$ 221,203.83	\$ 219,005.22	\$ 219,005.22	\$ 219,005.22	
EXPENSES		FY24 ACTUAL	FY25 APPROVED (7/31/24)	FY25 REVISED (4/22/2025)	FY26 PROPOSED	
Personnel/Payroll		\$ 162,922.53	\$ 164,602.96	\$ 164,602.96	\$ 135,573.73	
	Executive Director		\$ 101,012.91	\$ 101,012.91	\$ 75,759.68	Full time July - Dec; Change to half-time Jan - June (decreases \$25,253)
	Licensing Coordinator		\$ 40,448.38	\$ 40,448.38	\$ 40,448.38	No change.
	Investigator		\$ 3,000.00	\$ 3,000.00	\$ 3,000.00	No change.
	Payroll Taxes		\$ 11,000.00	\$ 11,000.00	\$ 9,119.42	Reduced per ED change.
	Deferred Comp		\$ 9,141.67	\$ 9,141.67	\$ 6,856.25	Reduced per ED change.
	Direct Deposit Fees		\$ 328.00	\$ 328.00	\$ 390.00	\$5.00 each (Jennifer/Stacey @ 52 = \$260; Investigator @ 26 = \$130)
Legal Fees	Attorney General	\$ 11,425.07	\$ 8,000.00	\$ 8,000.00	\$ 8,000.00	Est \$154.36/hour: 9 mtgs @ 2 hours each= \$2,778.48 + \$5,221.52 complaints
Audit Fees	Coulson & Assoc / Christiansen Accounting	\$ 1,000.00	\$ -	\$ -	\$ 12,750.00	Biennial FY24-FY25 Audit
Bank Fees	Merchant Services/Checking	\$ 5,267.15	\$ 4,600.00	\$ 4,600.00	\$ 5,000.00	March 2025 increased by \$0.113 per transaction.
Board Compensation	Salary	\$ 3,525.00	\$ 3,525.00	\$ 3,525.00	\$ 4,575.00	Board = \$3,675 [\$2,625 = 4 mtg x \$75 x 7] + [\$1,050 = 1 mtg x \$150 x 7] Committee = \$900 [4 mtgs x \$75 x 3]
Compact Participation Fee	ASLP Interstate Compact	-	-	-		TBD Start date pending legislation; fees unknown.
Dues	NCSB; RAN	\$ 552.50	\$ 550.00	\$ 550.00	\$ 550.00	NCSB \$450; RAN \$100
Equipment		\$ 331.68	\$ 500.00	\$ 500.00	\$ 500.00	No equipment anticipated.
Examinations		\$ 2,939.64	\$ 4,840.00	\$ 4,840.00	\$ 6,040.00	
	Exam Proctors	Various	\$ 2,400.00	\$ 2,400.00	\$ 2,400.00	24 exams @ \$100/proctor
	Exam Materials	IHS	\$ 2,440.00	\$ 2,440.00	\$ 3,640.00	FY25 = 24 exams @ \$150 each (3600) + \$40 shipping (Per contracted increase) (Increase from \$100 per exam FY25)
Insurance	Tort & Liability/Worker's Comp	\$ 1,618.59	\$ 1,700.00	\$ 1,700.00	\$ 1,800.00	Tort Liability \$1,000; Worker's Comp \$800
Database/Website	Albertson Consulting	\$ 7,491.64	\$ 8,855.00	\$ 8,855.00	\$ 9,100.00	Annual \$8,200; SSL Certs \$450; Support Overage \$450 (3 hours @ \$150/hour)
Meeting Expense	Rooms/lunches	\$ -	\$ 100.00	\$ 100.00	\$ 200.00	
Ofc Lease/Cost Share	OT Board	\$ 2,925.72	\$ 3,400.00	\$ 3,400.00	\$ 3,400.00	Shared office, supplies, equipment, & internet.
Office Supplies	ZOOM, Office365, Staples, QBO	\$ 246.62	\$ 2,586.00	\$ 1,240.00	\$ 1,240.00	Zoom \$160; Office365 x 2 accounts \$480; Misc \$200; QuickBooks Cost-Share \$400
Postage	USPS/OT Board	\$ 400.34	\$ 400.00	\$ 800.00	\$ 800.00	Increased costs to mail & return new exam materials - approximately \$20 per exam. Estimates 20 mailings.
Printing	State Printer	\$ -	\$ 200.00	\$ 200.00	\$ 200.00	Envelopes, checks, misc.
Professional Fees		\$ 12,415.00	\$ 41,100.00	\$ 41,100.00	\$ 5,100.00	
	Accounting	\$ 3,150.00	\$ 3,600.00	\$ 3,600.00	\$ 3,600.00	\$900/quarter
	Investigation Fees	\$ -	\$ 1,000.00	\$ 1,000.00	\$ 1,000.00	Expert reviewer services as needed.
	Lobbyist	\$ 9,000.00	\$ 36,000.00	\$ 36,000.00	\$ -	
	IT/Tech Support	\$ 265.00	\$ 500.00	\$ 500.00	\$ 500.00	
Telephone/Tech	AT&T; State of NV IT	\$ 863.86	\$ 525.00	\$ 525.00	\$ 525.00	Local \$300 (\$25/month). LD \$25 (\$2/month). Teleconference (if needed) \$200.
Travel		\$ -	\$ 200.00	\$ 2,000.00	\$ 1,700.00	
	Travel - In State	\$ -	\$ 200.00	\$ 2,000.00	\$ 200.00	Local mileage
	Travel - Out of State	\$ -	\$ -		\$ 1,500.00	Increased to cover one in-person meeting per year.
Total Operating Expenses		\$ 222,621.58	\$ 245,683.96	\$ 246,537.96	\$ 197,053.73	
Revenue in Excess of Operating Expense		\$ (1,417.75)	\$ (26,678.74)	\$ (27,532.74)	\$ 21,951.49	



State of Nevada

Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board

AGENDA ITEM 10

Report from Legal Counsel

Henna Rasul, Board Counsel will provide the Board with a general update on legal activities as needed.

Action: None – Informational Only



State of Nevada

Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board

AGENDA ITEM 11

Reports from Board Chair and Members

- a. Report from Board Chair and Board Members
- b. 2025 Proposed Meeting Schedule:
 - 1) Wednesday, July 16, 2025 at 4:30pm to include Public Workshop on proposed revisions to NAC 637B. Teleconference hosted via Zoom and in-person at the Reno Board Office.
 - 2) Wednesday, October 15, 2025 at 4:30pm to include Public Hearing on proposed revisions to NAC 637B. Teleconference hosted via Zoom and in-person at the Reno Board Office.
- c. Future Agenda Items
 - 1) Summary of 2025 Legislative Session and Impact on/Follow Up Required by the Board
 - 2) Public Workshop on Proposed Revisions to NAC 637B
 - 3) Public Hearing on Proposed Revisions to NAC 637B
 - 4) New Board Member Welcome
 - 5) Review & Approval to Revise FY26 Budget As Needed
 - 6) Other Items As Proposed

Action: Approve, Table, or Take No Action on the Matter



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AGENDA ITEM 12

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: None – Informational Only



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AGENDA ITEM 13

Adjournment

Action: Meeting Adjourned
