



Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Acting Secretary

Maryland Board of Examiners for Audiologists, Hearing Aid Dispensers & Speech-Language Pathologists
4201 Patterson Avenue
Baltimore, MD 21215
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February 16, 2021

The Honorable Paul G. Pinsky and committee members
Chair, Education, Health and Environmental Affairs Committee
2 West Miller Senate Office Building
11 Bladen Street
Annapolis, MD 21401

RE: SB 379 – Health Occupations – Registration of Audiology Assistants – Letter of Support with Amendments

Dear Chair Pinsky:

The State Board of Examiners for Audiologists, Hearing Aid Dispensers, and Speech-Language Pathologists (the “Board”) is submitting this letter of support with amendments for SB 379 - Health Occupations – Registration of Audiology Assistants.

This bill’s purpose serves to require an individual with the educational qualifications to be employed as an Audiology Assistant and be registered with the Board. The Board will adopt regulations, a code of ethics, continuing education requirements, and fees for Audiology Assistants.

The Board supports SB 379 with the following Board-approved amendments:

(1) Strike the terms “register”, “registrant”, “registration” and “registered” throughout the bill. Replace, where appropriate, with “license”, “licensed”, “licensing” and “licensure”.

The Board currently licenses all disciplines that are regulated by the Board. By definition, the word “registration” is the process of registering or being registered. Other types of registration can be births, marriages, deaths, etc. The definition of licensing is granting or regulating licenses for professionals. From the standpoint of solely the definition of the two words, licensure would be more appropriate. Most importantly, the Board believes it is imperative that Audiology Assistants be "licensed," in order for them to be held to all of the same requirements and standards as current disciplines the Board regulates under the Health Occupations Article, Title 2, Annotated Code of Maryland. Audiology Assistants will not technically be autonomous in

practice for they will be supervised 100% by a fully licensed audiologist. This will enable the supervising audiologist to complete diagnostic and treatment practices, while the Audiology Assistant provides technical assistance to patients. The Audiology Assistant will not have the presence of their supervisor 100% of the time and will have patient contact in some cases. For these reasons, the Board believes that in order to best protect the consumer, Audiology Assistants should be “licensed” and not “registered.”

(2) On page 6, lines 16-17, strike and add new language:

~~§§ 2-213 THROUGH 2-314.1, 2-314.2, 2-314.5, 2-314.7 THROUGH 2-314.9, 2-314.8, AND 2-315 THROUGH 2-317.~~

(3) On page 7, lines 12-16 add new language:

- (4) “AUDIOMETRIST ASSISTANT”;**
- (5) “AUDIOLOGICAL ASSISTANT”;**
- (6) “HEARING AID TECHNICIAN”;** OR
- (7) “COCHLEAR IMPLANT TECHNICIAN”.**

The Board believes there are additional current uses of unlicensed employees that are being placed in various practice and research settings in which facilities are issuing them inappropriate titles. These individuals are also very possibly carrying out inappropriate duties by virtue of not being licensed professionals. For these reasons, the Board would like to add the terms “Hearing Aid Technician” and “Cochlear Implant Technician” to the list of titles that may not be used to represent these individuals. Further, anyone attempting to utilize or practice in the capacity of an Audiology Assistant, must be licensed by the Board in order to do so, and may not be hired under or titled by any of these seven terms.

The Board respectfully requests a favorable report on SB 379 with the requested amendments. Thank you for your consideration of the Board’s position. If you have any additional questions, please contact the Board’s Executive Director, Dr. Candace G. Robinson, Au.D., at Candace.Robinson@maryland.gov or 443-915-7981.

Sincerely,


Candace G. Robinson, Au.D.
Board Executive Director

The opinion of the Board expressed in this document does not necessarily reflect that of the Department of Health or the Administration.