

HB161/SB379: Licensure of Audiology Assistants

Sponsors: Delegate Ariana Kelly; Senator Clarence Lam

Frequently Asked Questions

What is an Audiology Assistant?

An Audiology Assistant is an “extender” of the Audiologist, offering support in hearing and balance healthcare. Audiology Assistants allow the Audiologist- a clinical doctor with 8 years of education- to provide patient care at the top of their scope of practice (e.g. cochlear implant MAPping, diagnostic hearing testing, vestibular rehabilitation) by completing tasks that do not require the professional education. Many other professionals have assistants, including medical/physicians, dental, optometry, and pharmacy.

Why are Audiology Assistants needed?

COVID-19 has changed medical and healthcare dramatically! Providing patient care now requires significant additional steps, including scheduling additional time in-between patients to allow for cleaning and disinfecting rooms and equipment, additional personal protective equipment (PPE), and limited access to certain populations- often those most in need of audiologic services (e.g. individuals over the age of 65). Audiologists cannot see as many patients during an 8-hour day while complying with COVID-19 protocols. Audiology Assistants will ease the access to audiologic care by provided routine services and troubleshooting/triage services, not only during the COVID-19 pandemic, but also in busy practices and rural areas where access to an audiologist is limited.

Can't an Audiologist have an Audiology Assistant now?

Today, hearing health settings employ a variety of unlicensed and non-standardized employees who may be providing audiology-related services. Maryland, like many other states, has set a precedence by having statute for assistants. The Board of Audiologists, Hearing Aid Dispensers & Speech-Language Pathologists already has Speech-Language Pathology Assistants, as well.

What are the duties of an Audiology Assistant?

As extenders, Audiology Assistants will perform any tasks delegated to them from the Audiologist. Routine tasks in an audiology practice/clinic would include preparing a room, equipment, and/or patient for evaluation by the Audiologist, routine cleaning of hearing devices, and general instruction of device use. Complete job descriptions will be detailed in the regulations. Audiology Assistants would NOT be testing patients.

What kind of education is needed to be an Audiology Assistant?

Audiology Assistants are an entry-level position to hearing and balance healthcare, supervised by an Audiologist. The legislation requires Audiology Assistants have a high school diploma or equivalent and also meet the requirements from the Board of Examiners: be of good moral character, demonstrate oral competency, and submit to a criminal history records check. Additionally, the high school diploma or equivalent education requirement is consistent with the majority of other states who have already passed legislation for Audiology Assistants.

Who will supervise the Audiology Assistants?

The legislation allows each licensed Audiologist to provide general supervision two Audiology Assistants. Two Audiology Assistants per Audiologist was chosen to ensure the Audiologist can provide oversight and supervision, when needed.

What other states have Audiology Assistants?

Currently, there are 22 other states that have Audiology Assistants. Additionally, some states had legislation introduced in 2020 to add Audiology Assistants to their state, but the legislation was unable to be passed due to the COVID-19 pandemic. It is expected that 5 or more states will pursue Audiology Assistant legislation in 2021.

What is the economic development impact of the legislation?

There are currently more than 450 licensed Audiologists in the state of Maryland. The legislation allows a licensed Audiologist to supervise two Audiology Assistants; therefore, the legislation provides 900 or more employment opportunities.

Is there a scope of practice component to the legislation?

No.

Who opposes the legislation?

There is currently no known opposition to HB161/SB379.