



The Honorable Heather A. Bagnall, Chair
House Health Committee
240 Taylor Office Building
Annapolis, MD 21401

March 25, 2025

RE: SB 917- Health Occupations – Practice of Audiology – Definition

Position: Oppose

Dear Chair Bagnall, Vice Chair Cullison, and Committee Members:

My name is Dr. Briana Bruno Holtan and I am here in strong opposition to SB 917, Health Occupations – Practice of Audiology – Definition. I am a licensed practicing audiologist for over 28 years and am a small business co-owner of one of the largest and oldest private practices in the State of Maryland. I currently have 12 office locations, 10 in Maryland including the Eastern Shore, and have 11 Doctors of Audiology (Au.D.) primary health-care professionals on staff who play a critical role in the screening, evaluating, diagnosis, management, and treatment of hearing, balance and other related disorders to patients of all ages.

SB 917 will directly harm both patients and audiologists by creating unavoidable penalties, increasing costs, and reducing patient safety.

First, restricting audiologists from performing required health screenings makes it **impossible to comply with federal MIPS reporting requirements**. Audiologists are required to report on multiple screening measures, the majority of which are not directly related to hearing or balance disorders in the human ear. If these screenings cannot be completed, audiologists will face **Medicare payment penalties of up to 9% on all claims in a calendar year**. This is not optional and failure to report results in automatic financial penalties.

These payment penalties will not stay with the provider. They impact patients. Reduced reimbursement forces practices like mine to absorb losses or shift costs, which will ultimately **increase out-of-pocket expenses for patients** and reduce access to care.

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Second, this bill places audiologists' **state licensure at risk**. Audiologists would be forced into an impossible situation. They will be forced to choose between complying with federal requirements and professional obligations, or complying with restrictive state law. This type of regulatory conflict exposes licensed professionals to potential disciplinary action and jeopardizes their ability to practice.

Third, SB 917 creates a clear **patient safety risk**. Health screenings performed by audiologists are simple, standardized **pass/refer tools** designed to identify early warning signs and refer patients for further care, when necessary. These screenings are not intended to diagnose, but are basic safety checks. Removing these screenings increases the likelihood that serious conditions such as depression, tobacco use, or elder safety concerns go undetected and untreated.

From a public health perspective, this restriction is inconsistent. Health screenings are widely performed across Maryland by kiosks, volunteers, and other healthcare providers, often without advanced training. Yet SB 917 would prevent licensed audiologists, who are doctoral-level, state-licensed clinicians, from performing the same basic screenings. If it is acceptable for other healthcare professionals to screen for issues like tobacco use, elder maltreatment, alcohol use, and more, it is also be acceptable for audiologists.

At its core, SB 917 penalizes compliance, increases costs for patients, creates licensure risk for providers, and removes a critical layer of patient safety.

For these reasons, I respectfully urge an **UNFAVORABLE report on SB 917** to help your constituents.

Thank you for your time and consideration.

A handwritten signature in black ink that reads "Briana Bruno Holtan".

Briana Bruno Holtan, Au.D.
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