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REGISTER AUDIOLOGISTS

House Bill 5355 (Substitute H-1) First Analysis (6-2-98)

Sponsor: Rep. Michael Griffin
Committee: Health Policy

THE APPARENT PROBLEM:

Audiology is an increasingly complex health care practice that is governed by research-based methods which result in particular hearing and speech outcomes, and in generally improved aural health. These life-enhancing services have, for example, transformed countless children's lives when they are provided in schools and health care facilities throughout the state. Providers of these increasingly sophisticated audiological services often use methods that are enhanced by state of the art technological advances. And yet, audiology lacks a legal definition in the Michigan Public Health Code. Nor are audiologists registered or licensed by the state. In order to designate audiology as the entry point for aural health care, and also to better ensure consumers' quality of care, some have argued that audiologists should be registered by an agency of state government.

THE CONTENT OF THE BILL:

The bill would amend Article 15 of the Public Health Code to establish a system of registration for audiologists, restrict the use of certain titles to registered persons, set licensing fees, and create the Michigan Board of Audiology within the Department of Consumer and Industry Services (CIS). A "registered audiologist" would be a person registered with CIS who does not dispense hearing aids unless he or she held a valid hearing aid dealers license issued under Article 13 of the Occupational Code (MCL 339.1301 et al.).

The Michigan Board of Audiology would consist of two public members and three audiologists who would serve for four-year terms. The board would have to promulgate rules establishing registration requirements. The requirements would have to include, at a minimum, the possession of at least a Master's Degree in audiology from a board-approved college or university, supervised clinical experience in audiology, and a passing score on the national examination in audiology or a board-approved

alternate examination. There would be a \$20 application processing fee and an annual license fee of \$50.

The bill is tie-barred to House Bills 5736 and 5737, which would clarify that third party reimbursement is not required for athletic trainers.

MCL 333.16131 et al.

FISCAL IMPLICATIONS:

According to the House Fiscal Agency, the bill would increase state revenue by requiring a \$20 application processing fee and a \$50 annual registration fee for audiologists. The bill would likely also increase state costs related to the administration of the newly-created board of audiology. (6-1-98)

ARGUMENTS:

For:

As audiology becomes a more precisely defined field of health care, complete with sophisticated methods and technologies that promise certain outcomes, and as other health care providers and consumers come more clearly to recognize audiologists as providing a set of services that is an integral part of the health care system, it is sensible for audiologists to seek acceptance as the designated "entry point for hearing health care." This bill would help audiologists achieve that end. Specifically, House Bill 5355 would require the state to register audiologists, and to create a professional board within the Department of Consumer and Industry Services that is funded by their registration fees. Although audiologists are recognized by the certification requirement of their own professional body, the American Speech-Language-Hearing Association (ASHA), that organization does not assist or protect health care consumers who have complaints about their quality of care. What is more, audiologists are less likely to receive reimbursement for their services from third

party payers in the health insurance industry, or from health care corporations, without recognition by a state licensing or registration agency. In order for health care consumers to have more protection, and also for audiologists eventually to be reimbursed directly for their services, it is necessary that the state regulate the profession. This legislation will allow for the kind of regulation that is needed.

Against:

Adding statutory regulation of the practice of audiology is bad public policy for several reasons: first, no clear evidence of danger to the public health and safety is apparent; second, registration of more health professions as an alternative to licensure likely will result in increased health care costs and reduced access to services; and third, registration of another health profession could result in mandated-payment status for services provided by audiology professionals. It has not been shown that there is a need for state registration of audiologists, either to promote access or to enhance quality of care.

POSITIONS:

The Michigan Academy of Audiology supports the bill. (5-27-98)

The Department of Consumer and Industry Services opposes the bill. (5-27-98)

The Michigan State Medical Society opposes the bill. (5-28-98)

The Michigan Health and Hospital Association opposes the bill. (5-27-98)

The Michigan Hearing Aid Society opposes the bill. (5-27-98)

Analyst: J. Hunault

■ This analysis was prepared by nonpartisan House staff for use by House members in their deliberations, and does not constitute an official statement of legislative intent.