Dear Chairman Hawkins and Members of the Committee,

I am writing this letter in support of HB2195. It is my understanding that this bill proposes the consolidation of two Boards which offer the same services – the dispensing and fitting of hearing aids. The Kansas Board of Examiners in Fitting and Dispensing of Hearing Instruments, also known as the Board of Hearing Aid Examiners (KBHAE) oversees individuals who seek to dispense hearing aids. As a licensed audiologist, I am required to hold two licenses which allow me to do the same thing – dispense and fit hearing aids. I must hold an Audiology license which is managed by the Kansas Department of Aging and Disability Services (KDADS), and a Hearing Instrument License from the KBHAE. I have to pay two agencies in order to provide the same service. I pay \$135 every two years to KDADS and must have 20 Continuing Education hours, as well as \$100 every year to KBHAE and have 10 Continuing Education hours. I feel the one license, an audiology license, which requires a three or four year clinical doctorate (AuD) should supersede a license which has only the narrow scope of fitting hearing aids.

My professional responsibilities fall under the KDADS license, but if I should err in fitting a hearing aid, I am responsible to both KDADS and KBHAE. This is very confusing to the consumer. If there are sanctions, who determines what these are? Am I sanctioned by both agencies? Do I pay double fines? KDADS maintains accurate and up-to-date data, provides consumers with information regarding malpractice issues, and allows consumers to easily identify who is licensed in the state of Kansas to dispense hearing aids. The hearing aid board is small, and the average consumer is even unaware that the board exists and that dual licenses are required.

I feel the hearing aid license was once needed when the profession of audiology was small and not licensed. Since audiology is now a fully recognized licensed profession, the hearing aid board is no longer necessary to monitor the practice of audiology. It is understood that there are still many individuals holding a hearing instrument specialist license who are not audiologists. Their licenses continue to need to be monitored and updated as well. As I understand HB2195, the duties and powers of the KBHAE would be transferred to KDADS, but that it would leave the Hearing Aid Board intact enabling it to act in an advisory capacity to the Secretary of KDADS. This seems to be a logical action, particularly when dealing with hearing instrument specialists who are not audiologists.

Please take this opportunity to eliminate the need for dual licenses and consolidate the two boards. It just makes sense to do so.

Thank you,

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John Jan

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