

May 23, 2022

Delivered via email: Thomas.f.burke@state.ma.us

Thomas Burke, Executive Director
Board of Registration in Speech-Language Pathology and Audiology
Massachusetts Office of Consumer Affairs and Business Regulation
1000 Washington Street, Suite 710
Boston, MA 02118-6100

Dear Director Burke:

I write on behalf of the American Academy of Audiology (the “Academy”) in opposition to the Board’s draft policy that would not allow audiologists to provide telehealth services without an in-person assessment effective August 2022. The Academy recommends that the Board of Registration allow clinicians to evaluate patients through telehealth based on clinical judgement and needs of the patient, without a mandatory in-person assessment. This flexibility is critical to ensure that patients of all ages in rural and underserved areas are able to receive services in a timely manner.

The Academy is the largest organization in the nation of, by, and for audiologists. We are dedicated to the provision of quality hearing and balance care services through professional development, education, research, and increased public awareness of hearing and balance disorders.

Telehealth Flexibilities Necessary To Reach Rural and Underserved Populations

Approximately 20% of the U.S. population reside in rural areas, and older adults within these areas represent a vulnerable population with barriers to accessing hearing healthcare.¹ Individuals with even mild hearing loss are three times more likely to experience a fall, and falls are the leading cause of fatal injury for Americans over age 65.² In addition, research is now emerging indicating that Seniors with hearing loss are more likely to develop cognitive decline up to 40% faster than those without hearing loss.³ The Department of Veteran Affairs has recognized that providing audiology services via telehealth is an effective way to reach rural veterans.⁴ “Expanded use of innovative technology is increasing access points to hearing care in remote areas, enabling telehealth providers to expand their reach to patients and their families in satisfying and effective ways,” said Chad Gladden, audiology telehealth coordinator for the Audiology and Speech Pathology National Program Office.⁵

Proposed Draft Policy Would Jeopardize Remote Infant Hearing Screening Program

The draft telehealth policy if finalized would jeopardize the remote ABR testing program at Boston Children’s Hospital where they are providing remote newborn hearing screening to infants from Cape Cod or the islands at a hospital on Cape Cod. Making certain that infants receive newborn hearing screening

¹ Chan S., Hixon B., Adkins M., Shinn J. B., & Bush M. L. (2017). Rurality and determinants of hearing healthcare in adult hearing aid recipients. *The Laryngoscope*, 127(10), 2362–2367

² Centers for Disease Control and Prevention. (May 2018) *Deaths from Falls Among Persons Aged ≥65 Years — United States, 2007–2016*. <https://www.cdc.gov/mmwr/volumes/67/wr/mm6718a1.htm>;

³ Lin, Frank and Yaffe, Kristine. *Journal of the American Medical Association: Hearing Loss and Cognitive Decline in Older Adults*. (February 2013) <https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/1558452>

⁴ <https://www.blogs.va.gov/VAntage/62446/audiology-telehealth-helping-rural-veterans-access-hearing-evaluations/>

⁵ <https://www.blogs.va.gov/VAntage/62446/audiology-telehealth-helping-rural-veterans-access-hearing-evaluations/>

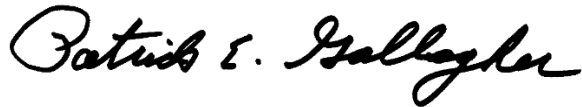
before leaving the hospital is critical to ensure the identification of a hearing loss and the necessary interventions as soon as possible.

Conclusion

The Department of Veteran's Affairs has successfully provided Audiology telehealth services since 2003 and the pandemic has demonstrated the benefits of telehealth flexibilities to ensure that patients receive timely access to needed services. The proposed draft policy that would mandate an in-person assessment prior to services being provided via telehealth would impede timely access to care and may result in less- than optimal outcomes. Allowing doctorally-educated clinicians to exercise their professional judgement as to whether a preliminary in-person assessment is necessary prior to telehealth services would provide needed flexibility and facilitate optimal patient outcomes.

If you have any questions about this letter, please contact Susan Pilch, J.D., Senior Director of Government Relations as spilch@audiology.org.

Sincerely,

A handwritten signature in black ink that reads "Patrick E. Gallagher". The signature is written in a cursive, flowing style.

Patrick Gallagher
Executive Director, American Academy of Audiology