

Audiology Advocate

AMERICAN
ACADEMY OF
AUDIOLOGY

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Every year, legislative and regulatory developments at both the federal and state levels affect audiology and hearing-health care. This quarterly newsletter provides a concise overview of key updates and issues you need to know, along with upcoming events of interest.

Federal Updates

Medicare Audiology Access Improvement Act Reintroduced

Bipartisan legislation to modernize Medicare coverage of audiology services, H.R. 2757 and S. 1996, has been reintroduced in both the House and the Senate.

On April 9, 2025, Representatives Gus Bilirakis (R-FL), Kevin Mullin (D-CA), and Nathaniel Moran (R-TX) introduced the Medicare Audiology Access Improvement Act (MAAIA), which aims to modernize Medicare with changes that would streamline access to care, reduce patient costs, and support the continuity of care for millions of Medicare beneficiaries. On June 9, 2025, Senators Elizabeth Warren (D-MA), Warren Grassley (R-IA), and Rand Paul (R-KY) introduced consistent legislation. Specifically, this legislation will:

- Eliminate pre-treatment order requirements so beneficiaries have streamlined access to audiologists, saving seniors out-of-pocket costs for extra office visits.

- Reclassify audiologists as practitioners under the Medicare statute, enabling services to be furnished through telehealth beyond the current September 30, 2025, expiration of such authority.
- Support continuity of care by authorizing audiologists to be reimbursed for the Medicare-covered diagnostic *and* treatment services that they are licensed to provide.

The Academy is encouraging members to take action to support MAAIA. This bill represents a significant bipartisan effort to modernize Medicare's coverage of audiology services. As the bill progresses through the legislative process, public support is crucial. We are asking our members to contact their U.S. representatives and senators to express support for MAAIA. Please use the link below to download a customizable outreach template.

[Access the Template](#)

[Find Your Member of Congress](#)

By reaching out to your members of Congress, you can play a vital role in advancing this legislation. The Academy will continue to monitor and update members on MAAIA as the bill moves through the legislative process.

Trump Administration's FY 2026 Budget Proposes Deep Cuts and Reorganization for HHS

In early May, the Trump administration released its fiscal year (FY) 2026 budget proposal for the Department of Health and Human Services (HHS). The budget signals a significant shift in health policy, emphasizing substantial funding cuts and major structural reforms. The proposed HHS budget totals \$93.8 billion, a 26.2 percent decrease from the FY 2025 enacted level. Key areas of reduction include the National Institutes of Health (NIH), Centers for Disease Control and Prevention (CDC), and the Indian Health Service (IHS).

The FY 2026 budget plan includes the most ambitious restructuring of HHS in decades, aiming to consolidate 28 operating divisions into 15. This includes:

- Consolidating the Health Resources and Services Administration (HRSA), the Substance Abuse and Mental Health Services Administration (SAMHSA), and other related entities into the Administration for a Healthy America (AHA).
- Eliminating 20,000 positions, including all but one position at the CDC's Early Hearing Detection and Intervention (EHDI) program.

The National Institutes of Health would undergo significant restructuring:

- Merging the National Institute on Deafness and Other Communication Disorders (NIDCD) and the National Institute on Alcohol Abuse and Alcoholism (NIAAA) into broader divisions focused on “priority health areas.”
- Establishing a centralized Office of Strategic Research Prioritization, tasked with directing funding toward areas deemed “nationally critical,” such as chronic disease prevention and emerging biothreats.
- Consolidating all extramural research grant programs under a single mechanism aimed at reducing administrative burden.

A centerpiece of the FY 2026 budget is the “Make America Healthy Again” (MAHA) initiative. Funded at \$500 million, the program would promote healthy living through nutrition, exercise, and wellness campaigns. The Academy will continue to monitor and report to our members as the Labor, Health, and Human Services Appropriations moves forward.

EHDI Program at Risk

On April 1, President Trump's administration eliminated almost the entire branch of the Early Hearing Detection and Intervention (EHDI) program that works with states to analyze data to help communities follow up with families to ensure that babies born d/Deaf or hard of hearing get support as early as possible.

EHDI operates under both the CDC and HRSA, and helps states coordinate newborn hearing screenings and response to infants who fail hearing tests. The program falls under the CDC's Disability and Health Promotion branch, which was among the positions cut when the CDC reduced its workforce by about 2,400 employees on April 1. EHDI had eight full-time workers and one fellow, all but one of the positions were eliminated.

The Academy sent a letter expressing concerns for the future of the program to Chairperson Brett Guthrie (R-KY) and Ranking Member Frank Pallone (D-NJ) of the

House Energy, and Commerce Committee and Chairperson Susan Collins (R-ME) and Ranking Member Patty Murray (D-WA) of the Senate Committee on Appropriations. The letter also requests that the funding Congress has previously allocated be given to EHDI programs.

[View the House Letter](#)

[View the Senate Letter](#)

Get in touch with your congressional representatives to urge them to restore funding for the EHDI program. Send them the Academy letters in an email urging their support for this crucial program!

[Find Your Member of Congress](#)

State Updates

State Legislative Highlights: Audiology Issues Across the United States

The start of summer signifies the closing of most state legislatures and the wrapping up of an active year of state-level policymaking, which was notable for audiology professionals. Across the country, we saw movement on a range of issues, including scope-of-practice expansion, adoption of the Audiology and Speech-Language Pathology Interstate Compact (ASLP-IC), and consumer protection in hearing-health care. This roundup highlights key developments from the 2025 sessions and offers a glimpse into the evolving policy landscape affecting audiologists nationwide and how the Academy shaped state-level policy this year.

ASLP-IC Gains Ground with New Legislative Wins

In 2025, the Audiology and Speech-Language Pathology Interstate Compact (ASLP-IC) continued to make strides in state-level policy. The ASLP-IC aims to facilitate interstate practice for audiologists and speech-language pathologists, allowing them to provide services across member states without obtaining additional licenses.

The Compact gained momentum in 2025 with notable legislative action in two states. On the final day of its legislative session, **Nevada** lawmakers passed Assembly Bill (AB) 230.

Once the Governor signs the bill into law, Nevada will become the newest state to join the compact. Meanwhile, **Arizona** successfully turned SB 1075 into law in mid-May. The total number of participating states to 35.

The Academy remains committed to supporting state audiology organizations in promoting the compact's adoption. For the most current information on the ASLP-IC and its implementation status, you can visit the official [ASLP-IC website](#) for more information.

Scope of Practice Expansion in Arkansas, Oregon, and Maryland

Scope of practice expansion for audiology began to take hold last year, beginning with Maryland's efforts to modernize statutes to enhance audiologists' ability to deliver comprehensive care. Building on that, this year continues to see states working towards different types of expansions.

In 2025, **Arkansas** passed Senate Bill (SB) 118, which modernized the audiology practice statute to include cerumen management, vestibular testing, and the ability to order limited imaging and bloodwork related to auditory and vestibular conditions. In contrast to the 2024 Maryland legislation, this bill ensures audiologists are not responsible for interpreting these tests, maintaining clear boundaries for clinical roles. The Academy assisted an advocate member in drafting testimony that effectively communicated the bill's benefits to lawmakers, contributing to its successful passage and marking a significant advancement for audiology in Arkansas.

Oregon also pursued scope-of-practice enhancements through SB 943, introduced in February. This bill aimed to redefine the "practice of audiology," enabling professionals to prescribe and fit a broader range of hearing-related devices and granting audiologists the authority to order and perform certain diagnostic procedures. To support the profession's advancement, the Academy submitted a letter to the Senate Committee on Health Care endorsing the bill, part of its broader commitment to assist state organizations in advocacy. Despite these efforts, the bill did not advance out of committee during the session.

In **Maryland**, House Bill 1298/Senate Bill 919 sought to further define last year's legislation initiated by House Bill 464/Senate Bill 795, which granted audiologists the right to order imaging, cultures, and bloodwork related to hearing and balance care. This year, the Academy submitted written testimony in support of these bills to the House Health and

Government Operations Committee, emphasizing its potential to improve timely, coordinated, and patient-centered care. Although the bills were withdrawn by sponsors, it reflects growing national momentum to remove barriers to care and strengthen audiologists' professional autonomy. Currently, Maryland is working under the legal framework established by House Bill 464/Senate Bill 795 in 2024. The Academy will continue to support member efforts in state legislatures to promote access and modernize audiology practice.

Protecting Audiology Standards: Opposition to Hearing Instrument Specialists' Scope Expansion

In October 2023, **Nebraska's** credentialing review process introduced proposals to expand the scope of practice for Hearing Instrument Specialists (HIS) to include cerumen management, tinnitus care, and cochlear implant candidacy assessments. The Academy responded swiftly, submitting detailed public comments, participating in a key hearing, and rallying members to voice concerns about patient safety and professional standards. These efforts continued into early 2025 when Legislative Bill (LB) 154 was introduced in February, prompting the Academy to submit formal opposition testimony and engage directly with Nebraska lawmakers to highlight the risks of expanding these responsibilities to underqualified providers. While LB 154 was held in committee as the legislative session ended, Nebraska's carryover rules mean this issue could resurface next year. The Academy remains vigilant, closely monitoring the bill's progress to protect high standards in hearing-health care.

In **Nevada**, similar concerns arose with the introduction of Assembly Bill (AB) 177 in late April to permit HIS to provide cerumen management and tinnitus care. The Academy submitted a letter of opposition to the legislature, stressing that these procedures require advanced training to be performed safely and effectively. In addition, the Academy activated a grassroots email campaign encouraging Nevada residents to urge lawmakers to keep the bill from advancing. This bill was originally provided to the legislature through the Nevada State Board of Speech-Language Pathology and Audiology, however, in response to the opposition from the Academy and local audiologists, the Board held an emergency meeting, resulting in a passing vote to remove the section allowing hearing aid dispensers to perform cerumen and tinnitus management. The bill was formally amended in committee, passed both chambers with the amendment, and signed into law by the governor in late May.

Protecting Patients: The Academy's Commitment to Consumer Safeguards

In **Florida**, the Academy supported the Florida Academy of Audiology (FLAA) in opposing HB 1341, legislation that would have restricted the use of the title “Doctor” in clinical settings exclusively to physicians. Despite existing state laws already addressing credential misuse, this bill threatened to confuse patients about the qualifications of audiologists and other healthcare providers. The Academy and FLAA launched a grassroots email campaign urging Floridians to oppose the measure. Thanks to this widespread advocacy, the legislation failed to pass before the Legislature adjourned in early May, marking a major win for audiologists and patients.

The Academy and FLAA also opposed companion bills SB 126 and HB 101. Besides their original intent of removing the state’s mail-order hearing aid ban in Florida, these bills included additional language removing hearing testing requirements with mandates requiring telehealth as the sole service delivery method. Coordinated opposition letters led to the defeat of these bills and raised awareness about the need for patient-centered hearing health policies.

In **Kentucky**, the Academy worked with members in the state to urge lawmakers to swiftly advance SB 93, a bill designed to expand hearing aid coverage and strengthen consumer protections against third-party administrators. The Academy launched a grassroots campaign to mobilize Kentucky residents to reach out to their representatives and advocate for the bill’s passage. Despite these efforts, the bill stalled in committee and did not move forward during this session.

In **North Carolina**, the Academy joined forces with the North Carolina Audiology Association to support HB 926, a bill modernizing the state’s hearing-health care laws. This legislation removes outdated dual licensure requirements for audiologists with master’s degrees and clarifies the role and regulation of audiology assistants. A key highlight of HB 926 is its focus on consumer protection, requiring clear disclosure when patients purchase “locked” hearing aids that can only be adjusted by the original seller, empowering patients with transparency and choice. As the legislative session continues through late July, the Academy remains committed to working alongside state leaders to advance this important, patient-centered legislation.

Advancing Audiology Policy: Issue Briefings

As part of its advocacy efforts, the Academy has developed two critical issue briefings on third-party administrators (TPAs) and hearing screenings. These resources provide policymakers with essential information on these issues and the Academy's legislative priorities.

Third-Party Administrators: Restricting Access to Hearing-Health Care

Created to streamline health care benefits, TPAs have expanded their influence, often at the expense of patient choice and provider autonomy. TPAs may dictate provider networks, limit available hearing aid brands, and impose restrictive reimbursement structures that create financial and administrative burdens for audiologists. Patients are frequently misinformed about their coverage, leading to unexpected costs and reduced access to necessary hearing care. The Academy's briefing calls for increased transparency and protections against TPAs steering patients toward specific devices or providers.

[**View the Issue Briefing**](#)

Hearing Screenings: Addressing Gaps in Early Detection and Access

Untreated hearing loss has far-reaching consequences, from cognitive decline in older adults to speech and learning difficulties in children. While newborn hearing screenings are widely implemented, there is no federal mandate for school-age hearing screenings, leaving gaps in early detection. Additionally, Medicare does not currently cover routine hearing screenings for adults, despite growing evidence that early intervention improves overall health outcomes. The Academy's briefing advocates for standardized screening protocols across all age groups and increased access to audiologists.

These issue briefings not only serve as leave-behinds for congressional offices but also provide members with the knowledge needed to advocate for meaningful policy changes. By raising awareness about the challenges posed by TPAs and the critical need for improved hearing screenings, the Academy continues to push for policies that protect patient access and enhance hearing healthcare for all.

[**View the Issue Briefing**](#)

From Capitol Hill to Your Clinic: SPAN July Meeting on Medicaid Cuts

The State Policy Advocacy Network (SPAN) will convene again on **July 29** for a critical meeting about Medicaid funding. SPAN brings together nationwide audiologists and advocates dedicated to advancing the profession and protecting patient access to hearing health care. Meeting quarterly, this network provides a platform for discussing pressing state-level policy issues, sharing best practices, and coordinating efforts to influence legislation and regulations across all 50 states.

This quarter's meeting will center on the urgent issue of proposed federal Medicaid cuts. This budget bill, currently under consideration in Congress, seeks to significantly reduce federal Medicaid spending—an action that would inevitably lead to funding shortfalls at the state level. Decisions made in Washington, D.C. will directly impact state budgets and could trigger rollbacks in audiology coverage, affecting provider reimbursement, access to diagnostic services, and ultimately, patient outcomes. To help navigate this challenge, SPAN will host a special guest speaker, who will provide insights into Medicaid funding, this legislation's projected impact, and how to best prepare for these cuts.

If you are passionate about audiology, public policy, and protecting access to care, now is the time to participate in SPAN. Your voice matters—and together, our collective advocacy can make a difference. For more information or to get involved with SPAN, please contact the Academy using the information below.

Have questions? Contact a member of the government relations team:

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