**Texas Otolaryngology Day at the Texas Capitol**

For the first time, the Texas Association of Otolaryngology hosted its very own “Texas Otolaryngology Day” at the Texas Capitol. ENTs from across Texas met at the Texas Medical Association for an issue briefing before heading up to the Capitol to speak with lawmakers and their staffs regarding our legislative agenda.

Later, the group was recognized with a formal resolution by Senator Charles Schwertner, MD (R-Georgetown) in the Texas Senate and by Representative Tom Oliverson, MD (R-Tomball) in the Texas House. Thanks to everyone who helped make Texas Otolaryngology Day such a success!

**Targeted Screening for Congenital Cytomegalovirus (CMV)**

Congenital Cytomegalovirus, or CMV, is a relatively common viral infection which represents the leading cause of non-genetic childhood hearing loss in newborns and infants. CMV infections typically pass from a pregnant woman to her baby and are often asymptomatic, with few to no signs of disease at birth. Without appropriate screening, children with CMV are rarely identified and miss out on opportunities for early intervention, treatment, and monitoring.

This session, TAO joined forces with the National CMV Foundation to advance legislation that would add CMV to the list of conditions for which Texas newborns are screened. Screening newborns for CMV can help identify these children so they can receive early intervention, evaluation, and treatment to mitigate long-term hearing loss.

Originally filed as SB 1285 by Senator Nathan Johnson (D-Dallas) and HB 4068 by Representative Julie Johnson (D-Dallas), the CMV screening language was successfully amended to HB 2478 by Representative Stephanie Klick. The bill was ultimately passed with broad, bipartisan support and has since been sent to Governor Greg Abbott for his signature. Thanks to the work of the TAO, all newborns in Texas who fail their initial hearing test will now be screened for CMV.

**Scope of Practice with Audiologists/Speech Language Pathologists**

Sometimes, a successful legislative session is defined by the things that don’t become law…like troubling scope of practice expansion offered by midlevel practitioner groups.

Of particular concern was HB 1875, filed by Representative Ryan Guillen (R-Rio Grande City), which would have enacted the Audiology and Speech Language Pathology Interstate Compact (ASLPIC) in Texas. States participating in this compact would have the ability to adjust scope of practice for audiologists/speech language pathologists to mirror the requirements of the least restrictive states. This would allow members of the compact to bypass Texas laws with stronger standards of practice designed to protect the public and maintain patient safety.

Unlike the medical licensure compact where a physician is given the opportunity to obtain an expeditated license in the participating state, HB 1875 is what’s known as a “privilege to practice” compact, which allows audiologists or speech language pathologists licensed in another state the automatic privilege to practice in the state of Texas without the need to obtain a Texas license.

Dr. Chad Whited represented the TAO at the House Committee on Public Health and provided written testimony in opposition to HB 1875. While the bill was unfortunately voted out of the Texas House of Representatives, the TAO lobby team was successful in killing the bill in the Texas Senate for the second session in a row.