Preserve Medicaid Coverage of Audiology and Speech-Language Pathology Services

Action
Request your members of Congress to support legislative efforts to provide Medicaid coverage for audiology and speech-language pathology services.

Background
Audiology and speech-language pathology services are required services under Medicaid for children up to 21 years of age. Under the Early Periodic Screening Diagnostic and Treatment (EPSDT) provisions of the Social Security Act, states are required to provide comprehensive services and furnish all eligible Medicaid recipients (i.e., up to age 21) with services that are medically necessary to correct and ameliorate health conditions identified through screening and diagnostic services. These medically necessary services include habilitative audiology and speech-language pathology services and devices. Audiology and speech-language pathology services are optional for the adult and senior populations.

There have been many reports that Congress is considering moving Medicaid to a block grant program. A block grant program would provide states with a lump sum payment and allow states to run programs as they deem appropriate. States would be responsible for covering costs beyond the federal allotment. Under this system, states would no longer be mandated to provide EPSDT services. This could put children at risk of not receiving medically necessary services, especially if states decide to cut Medicaid funding during tough fiscal times. Additionally, given that these services are optional for adults, individuals who have suffered from serious medical conditions—such as stroke—are at even greater risk of not receiving rehabilitative services that can restore function and enable them to return to work and/or active involvement in their communities. As noise-induced hearing loss becomes more prevalent, increasing numbers of individuals could greatly benefit from preventative and diagnostic services provided by audiologists.

Under the Patient Protection and Affordable Care Act (ACA), the Medicaid program will provide coverage for an additional 17 million Americans who have not previously qualified for Medicaid. Providing access to health care coverage to millions of lower-income Americans may ultimately save both the state and federal governments money through preventative and rehabilitative services. Another provision of the ACA expands coverage to individuals previously uninsured or underinsured through the health care insurance exchanges. The insurance plans offered in the exchanges must include coverage in at least 10 basic areas, including habilitative and rehabilitative services and devices. Currently, Medicaid expansion guidance addresses coverage in these areas; however, any restriction to Medicaid coverage would impact access to these needed services.

Speech-language pathologists provide cognitive, communication, and swallowing interventions for both children and adults. For children, these services are considered habilitative and in many cases are medically necessary. Currently, speech-language pathologists work closely with individuals who have swallowing difficulties; absent appropriate intervention, these individuals risk malnutrition and life-threatening medical conditions (e.g., aspiration pneumonia) that often require additional hospital and medical attention, thus placing additional costs on the Medicaid program.

ASHA Contact:
Ingrida Lusis
Director of Federal and Political Advocacy
Phone: 202-624-5952
E-mail: ilusis@asha.org

Additionally, coverage of audiology services and communication devices increases patient independence and employability, which ultimately impacts state budgets. Untreated hearing loss in adults leads to decreased performance at work and may create safety issues by interfering with an individual’s ability to hear environmental sounds and warning signals. Various studies have demonstrated that hearing aid use can significantly reduce the physical and psychosocial dysfunction (e.g., isolation, depression, hypertension, and stress) that often accompanies hearing loss.