

Moving Forward in Tough Economic Times

Prosperity is a great teacher;
adversity is a greater ~ William Hazlitt

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AMERICAN
SPEECH-LANGUAGE
HEARING
ASSOCIATION

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Introduction (continued)

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- Early Hearing Intervention and Detection Act reauthorization
- NCLB and IDEA

Introduction – State Issues

- State Legislative trends
 - Reduction in reimbursement for Early Intervention services
- Insurance coverage for Autism
- Insurance coverage for Hearing Aids and Cochlear Implants

State Model legislative language

- EHDI Phase II – Tracking and early Intervention Services and Hearing Screening for a Lifetime
- Telepractice/Telehealth
- Classroom Acoustics
- State Licensure

History of State/ASHA Interaction

- State recognized associations contacted State Advocacy team with immediate legislative or regulatory need
- 10 years ago CSAP and the Legislative Council requested increased collaboration with ASHA
- Past three years ASHA has committed Focused Initiative resources to work more closely with individual states

State Outreach Initiative

Purpose

- To improve communication between recognized state speech-language-hearing associations (SSLHA) and ASHA
- To increase collaboration between ASHA and the SSLHAs
- Overwhelmingly supported by the Executive Board at its October, 2007 meeting

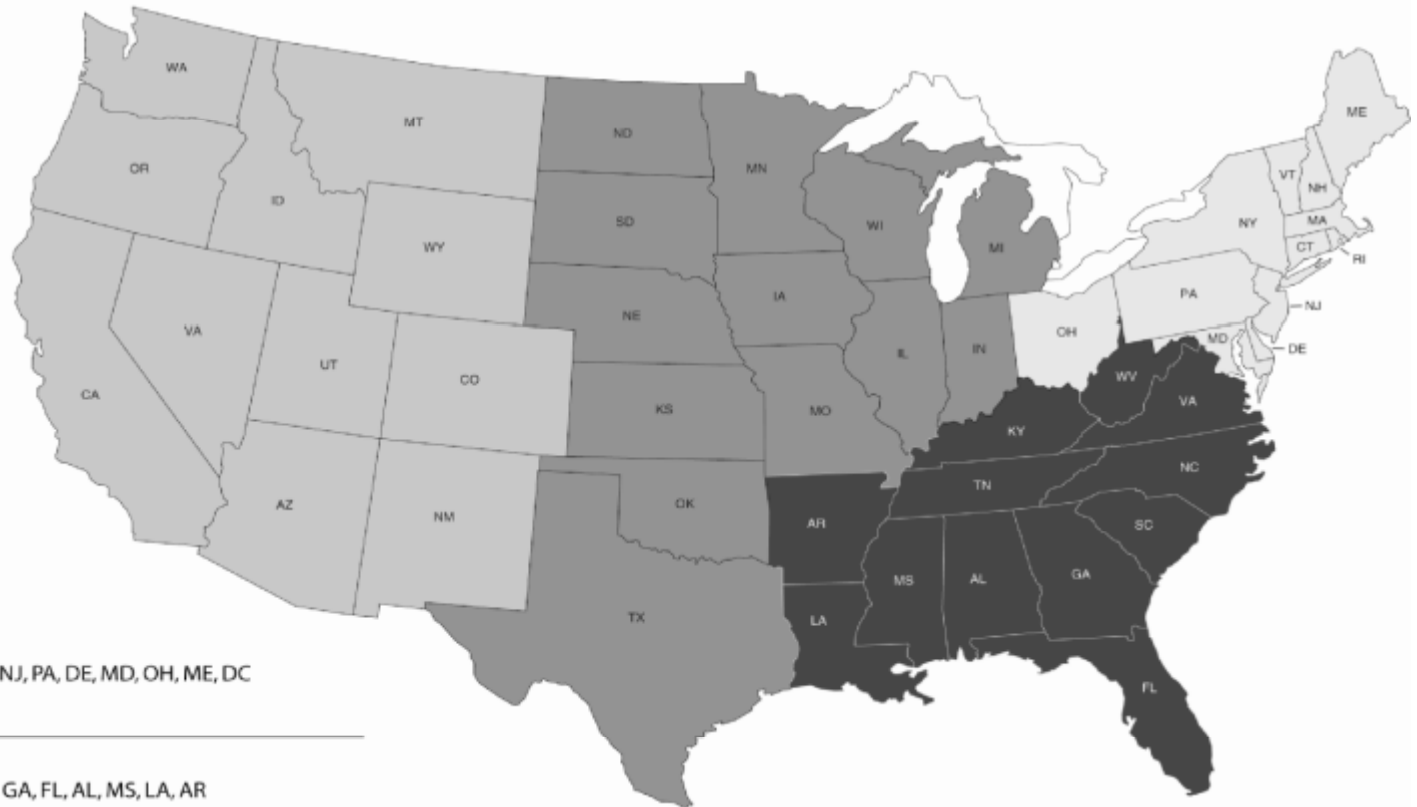
Under the New Plan:

- Each state was assigned a direct staff liaison from the State Advocacy Team
- Team members make periodic contact with state association leaders to learn about the important issues in the state
- Team members serve as the primary point of contact for the leadership on state issues and will triage SSLHA to appropriate team members or staff in other units, as needed

Regionalization of states

- State team members will be responsible for one of four regions; northeast, south, central/midwest, or west
- Team members will make initial and periodic contact with state leaders via e-mail, conference calls and onsite visits
- Team members will assist states with:
 - Legislative efforts
 - Regulatory issues
 - Association management issues

State Liaison Model Regional Map



Northeast Region
MA, NH, VT, NY, RI, CT, NJ, PA, DE, MD, OH, ME, DC

South Region
VA, WV, KY, NC, TN, SC, GA, FL, AL, MS, LA, AR

Central Region
ND, SD, NE, KS, OK, TX, MO, IA, MN, WI, IL, IN, MI

West Region
HI, AK, CA, OR, WA, NV, ID, UT, AZ, NM, CO, WY, MT

State Team Liaisons

Northeast Region – MA, NH, VT, NY, RI, CT, NJ, PA, DE, MD, OH, ME, DC
Rend Al-Mondhiry ral-mondhiry@asha.org 800-498-2071, ext. 5665

South Region – VA, WV, KY, NC, TN, SC, GA, FL, AL, MS, LA, AR
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Central Region – ND, SD, NE, KS, OK, TX, MO, IA, MN, WI, IL, IN, MI
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West Region – HI, AK, CA, OR, WA, NV, ID, UT, AZ, NM, CO, WY, MT
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Activities and resources to support increased collaboration

State Legislative and Regulatory tracking system which allows staff to monitor legislative and regulatory activity in all 50 states and the District of Columbia. Based on this information, state advocacy staff can **monitor trends** in licensure, health care and education policy and provide SSLHAs with technical assistance, testimony and related resources relative to specific legislative and regulatory measures.

Activities and resources to support increased collaboration

State Leaders Web Page, available at <http://www.asha.org/about/legislation-Advocacy/stateleaders/BuildingBlocks.htm>, developed to provide resources which are meant to serve as the **building blocks to assist leadership** with association operations, developing leadership skills and advocacy campaigns, as well as promoting the professions and improving communications.

Activities and resources to support increased collaboration

- Use of the ASHA Web site for grassroots letter and e-mail campaigns to state legislators and regulators.
- ASHA's **State Association Workshop** that is held annually in conjunction with the Spring meeting of the Council of State Association Presidents (CSAP) to provide information on federal and state public policy issues, trends, and activities.
- Education of state legislators and staff on critical state issues during the annual meeting of the **National Conference of State Legislators**.

Activities and resources to support increased collaboration

- **Three national-state networks:**
 - **State Education Advocacy Leaders (SEALs)** to facilitate information exchange on state education issues and serve as the conduit for members with the DOE
 - **State Advocates for Reimbursement (STARs)** to advocate with legislators, state insurance commissioners, health plans, unions, and employers on matters related to private health care plan reimbursement for audiology and speech-language pathology services;
 - **State Medicare Administrative Contractor Network (SMAC)** to enhance communication and to perpetuate the advocacy and leadership of ASHA members in administrative and policy decisions that influence Medicare coverage, reimbursement, and delivery of speech-language pathology services and audiology services.

Activities and resources to support increased collaboration

- Presentations by staff and Executive Board members at state association meetings (limited funding may be available).
- **State Political Action Committee (PAC) manual** developed to assist states in creating a successful PAC.
- **Information and technical assistance from ASHA continuing education staff** on programming, marketing, and evaluating state association-sponsored continuing education opportunities.

Activities and resources to support increased collaboration

- Print and audiovisual sale products to assist state associations with their career recruitment and public awareness campaigns, including:
 - a videotape on the professions of speech-language pathology and audiology;
 - Member recruitment brochures and Advocacy materials;
 - Better Hearing and Speech Month products and information.

Activities and resources to support increased collaboration

- **Data** (employment information, caseload characteristics, salaries, etc.) from the following four ASHA Omnibus-replacement surveys:
 - school-based speech-language pathologists;
 - audiologists;
 - health-care based SLPs; and
 - a rotating population of individuals in private practice, academicians, researchers, etc.
- **Financial aid** in the form of loan and grant programs, subject to availability of funds in the ASHA budget.

State of the Economy – Effect on the Professions

Where have we been?

Salary Trend Data - Audiologists & SLPs 1999 - 2009

Year	Audiologists (11 – 12 months)	School-Based SLPs (9 – 10 months)	Health Care-Based SLPs (11 – 12 months)
1999	\$44,000	\$40,000	\$44,000
2000	\$48,000	\$41,000	\$44,000
2001	\$50,000	\$43,000	\$45,000
2002	\$54,000	\$43,000	\$51,000
2003	\$55,000	\$45,000	\$52,600
2004	\$62,000	\$50,000	n/a
2005	n/a	n/a	\$60,000
2006	\$65,000	\$52,131	n/a
2007	n/a	n/a	\$65,000
2008	\$73,000	\$58,000	n/a

Shortage/Persistent Vacancy Data

	2008 Audiology Survey	2008 SLP Schools Survey	2007 SLP Health Care Survey
Job openings more numerous than job seekers	30%	72%	59%
Job openings in balance with job seekers	36%	20%	28%
Job openings fewer than job seekers	34%	8%	13%

The US Economy – a few key facts

- The US has the largest national economy - ± \$13.8 trillion in 2007
- The US also has the most external debt of any country ... > \$13 trillion as of June '08
- Unemployment was 4.9% in January 2008
... rose steadily to 7.2% in January 2009
(highest in 17 years)

The US Economy – a few key facts

The Housing Market:

- Home prices down by 20% from Summer 2006
- Foreclosures increased by 81% in 2008:
 - 1 in every 54 households had at least 1 filing notice (notice of default, auction sale, or bank repossession)
 - 3.4 million foreclosure filings on 2.3 million properties

...and of course, the Stock Market!!



What Members Have to Say!

Advisory Council Survey Results: What impact is the economy having on you?

Response	AAC		SLPAC		All Respondents	
	Percent	Number	Percent	Number	Percent	Number
No impact	8%	3	10%	4	9%	7
Minor negative impact	54%	21	64%	27	59%	48
Significant negative impact	36%	14	26%	11	31%	25
Minor positive impact	3%	1	0%	0	1%	1
Significant positive impact	0%	0	0%	0	0%	0

What impact is the current economy having on you, professionally?

Response	AAC		SLPAC		All Respondents	
	Percent	Number	Percent	Number	Percent	Number
No impact	10%	4	12%	5	11%	9
Minor negative impact	41%	16	45%	19	43%	35
Significant negative impact	49%	19	43%	18	46%	37
Minor positive impact	0%	0	0%	0	0%	0
Significant positive impact	0%	0	0%	0	0%	0
Not employed	0%	0	0%	0	0%	0

What impact is the current economy having on your employer?

Response	AAC		SLPAC		All Respondents	
	Percent	Number	Percent	Number	Percent	Number
No impact	5%	2	7%	3	6%	5
Minor negative impact	21%	8	36%	15	29%	23
Significant negative impact	66%	25	50%	21	58%	46
Minor positive impact	0%	0	2%	1	1%	1
Significant positive impact	0%	0	0%	0	0%	0
Not employed	5%	2	2%	1	4%	3
I do not know.	3%	1	2%	1	3%	2

Have you made plans to reduce your personal spending in 2009?

Response	AAC		SLPAC		All Respondents	
	Percent	Number	Percent	Number	Percent	Number
By a little	59%	23	60%	25	59%	48
By a lot	33%	13	31%	13	32%	26
Not at all	5%	2	7%	3	6%	5
I do not know.	3%	1	2%	1	3%	2

Have you made plans to reduce your professional spending in 2009?

Response	AAC		SLPAC		All Respondents	
	Percent	Number	Percent	Number	Percent	Number
By a little	49%	19	54%	22	51%	41
By a lot	33%	13	32%	13	33%	26
Not at all	13%	5	7%	3	10%	8
Not employed	5%	2	7%	3	6%	5
I do not know.	0%	0	0%	0	0%	0

Has your employer made plans to reduce spending in 2009?

Response	AAC		SLPAC		All Respondents	
	Percent	Number	Percent	Number	Percent	Number
By a little	21%	8	21%	9	21%	17
By a lot	58%	22	50%	21	54%	43
Not at all	5%	2	2%	1	4%	3
Not employed	13%	5	24%	10	19%	15
I do not know.	3%	1	2%	1	3%	2

Have economic conditions impacted the number of audiology positions in your work setting?

(Select all that apply)

Response	AAC		SLPAC		All Respondents	
	%	#	%	#	%	#
We reduced the number of positions in 2008.	5%	2	2%	1	4%	3
We increased the number of positions in 2008.	8%	3	2%	1	5%	4
We plan to reduce the number of positions in 2009.	3%	1	0%	0	1%	1
We plan to increase the number of positions in 2009.	8%	3	0%	0	4%	3
We have not made any reductions, but are not filling open positions.	32%	12	2%	1	17%	13
We have made no significant changes to the number of positions.	42%	16	17%	7	29%	23
I do not know.	3%	1	2%	1	3%	2
Not employed	0%	0	2%	1	1%	1

Have economic conditions impacted the number of SLP positions in your work setting?

(Select all that apply)

Response	AAC		SLPAC		All Respondents	
	%	#	%	#	%	#
We reduced the number of positions in 2008.	0%	0	7%	3	4%	3
We increased the number of positions in 2008.	18%	7	12%	5	15%	12
We plan to reduce the number of positions in 2009.	0%	0	10%	4	5%	4
We plan to increase the number of positions in 2009.	11%	4	15%	6	13%	10
We have not made any reductions, but are not filling open positions.	16%	6	20%	8	18%	14
We have made no significant changes to the number of positions.	16%	6	29%	12	23%	18
I do not know.	3%	1	12%	5	8%	6
Not employed	0%	0	5%	2	3%	2

State Economic Woes

- **Public Health Programs:**
 - 26 states have proposed or implemented cuts affecting family access to health insurance or access to health care services
 - California with a growing budget deficit projected to be over 40 billion in the next 17 months, is proposing cuts that would lead to the elimination of health care coverage for more than 429,000 adults.

State Economic Woes (Con't)

- **Programs for elderly and disabled:**
 - At least 22 states and the District of Columbia are proposing cuts to medical, rehabilitative, home care and other services for the elderly and those with disabilities
- **K-12 Education:**
 - At least 25 states are proposing cuts to both K-12 and early education programs

State Economic Woes (con't)

- **Colleges and Universities:**
- 30 states are reducing funds to public colleges and universities resulting in cuts to faculty and staff and increasing the tuition in over half of the 30 states by 4 -15 %
- **State Workforces:**
 - 36 states and the **District of Columbia** are making cuts that affect staffing. Several are proposing hiring freezes, layoffs, reducing state worker wages and delayed scheduled pay increases.

Stimulus (Stabilization) Package

American Recovery & Reinvestment Act (ARRA)

- Signed into law 2-17-09
- \$25 billion:
 - Title I ESEA/NCLB
 - Parts B & C of IDEA
- \$1.1 billion for clinical research
- \$\$ for Health Information Technology
- \$53.6 billion - State Fiscal Stabilization Fund
- \$\$ for Medicaid (Last figure 17 billion)

Stimulus (Stabilization) Package

American Recovery & Reinvestment Act (ARRA)

- Half of the funds are available immediately
- Other half will be released on July 1, 2010
- ASHA analysis of ARRA and advocacy resources available from ASHA at:

<http://www.asha.org/advocacy/federal/ARRA.htm>

Can individuals apply for ARRA funds?

- No. Individuals cannot apply for Federal ARRA funds. The federal ARRA education funds are provided to the states and local agencies
- ARRA funding for IDEA , for example, increases the federal share from 17.2% to 34.2% a significant step toward full funding (40%)

Does ARRA address Medicaid?

- Yes. The moratoria on Medicaid regulations cutting reimbursement for case management rehabilitative services, transportation and administrative claiming extends until July 1 2009

What are the elements of the State Fiscal Stabilization Fund

- Stabilize state and local government budgets to minimize and avoid reductions in education and public services
- Ensure that local Education agencies (LEAs) and institutions of higher education have resources to avert cuts and retain teachers
- Support modernization and repair of school and college facilities and new school construction

Grants to States

Snapshot (for complete view please see the attachment)

U.S. DEPARTMENT OF EDUCATION American Recovery and Reinvestment Act - Initial Release of Funds									2,661,029
Initial Release Percentage	50%	50%	50%	50%	50%	100%	300%	50% of 2010-2011	
State	ESSA Title I Grants to LEAs	ESSA Title II Grants to LEAs	ESSA Title III Professional Grants	ESSA Title IV Grants to LEAs	ESSA Title V Grants to LEAs	ESSA Title VI Grants to LEAs	ESSA Title VII Grants to LEAs	ESSA Title VIII Grants to LEAs	Total
Alabama	81,494,808	50,932,393	2,994,914	3,245,430	4,895,365	342,913	595,487	498,457,745	672,896,771
Alaska	14,724,855	15,470,210	698,369	1,209,922	900,000	242,913	3,170	70,238,547	110,294,384
Arizona	97,543,061	89,236,032	2,851,430	4,203,970	6,543,167	261,403	722,495	691,339,005	882,534,531
Arkansas	56,546,000	56,086,966	2,762,823	1,983,171	3,254,916	242,913	363,693	297,306,166	417,668,624
California	862,480,237	619,472,066	20,614,153	28,816,884	28,239,108	1,829,887	3,707,678	8,999,879,179	9,280,087,476
Colorado	56,587,581	74,366,288	3,640,729	3,475,088	3,693,532	342,913	497,576	829,383,821	845,895,596
Connecticut	36,267,607	66,466,734	2,544,207	19,244,965	1,667,387	242,913	427,851	363,654,636	497,825,541
Delaware	16,216,822	16,290,288	698,369	1,209,922	900,000	242,913	3,170	90,339,057	121,889,417
District of Columbia	16,801,162	6,200,862	190,243	1,209,922	929,710	242,913	3,170	60,892,636	69,260,719
Florida	246,287,676	313,621,333	9,690,404	11,630,640	16,079,420	810,417	2,540,636	1,890,195,968	2,408,943,333
Georgia	176,534,148	198,879,388	6,234,874	7,302,771	9,343,892	429,820	940,207	1,632,861,668	1,989,321,739
Hawaii	16,595,937	19,962,836	630,536	1,209,922	1,124,675	242,913	87,893	120,759,273	166,363,771
Idaho	17,477,655	25,622,080	1,134,363	1,179,801	1,649,816	242,913	60,630	195,236,241	212,604,234
Illinois	210,119,781	283,229,877	9,196,746	9,772,219	10,029,854	679,887	1,411,274	1,376,964,231	1,872,286,383
Indiana	84,398,811	126,787,433	4,816,266	4,263,969	6,937,674	361,769	739,054	674,636,943	801,820,887
Iowa	35,748,511	61,847,567	2,070,699	1,995,020	2,687,864	242,913	379,616	316,487,483	410,749,382
Kansas	39,434,630	53,425,095	2,240,209	1,300,440	2,554,377	242,913	321,390	390,345,252	507,118,229
Kentucky	77,873,647	79,764,888	6,298,379	2,707,822	4,669,137	242,913	398,498	436,398,666	626,294,629
Louisiana	86,399,269	94,218,763	3,664,771	2,683,962	4,947,880	242,913	694,664	474,727,326	669,710,279
Maine	16,592,126	25,951,967	1,203,952	1,209,922	1,203,879	242,913	119,996	129,618,241	176,822,353
Maryland	67,997,219	100,120,901	3,481,261	3,752,767	3,429,898	249,474	829,924	685,486,478	793,899,439
Massachusetts	81,840,126	140,216,760	5,131,233	3,660,913	3,634,314	268,281	770,460	686,152,957	901,680,717
Michigan	194,361,437	200,303,919	6,696,203	6,172,174	6,062,165	447,223	1,187,077	1,090,732,546	1,465,656,744
Minnesota	47,866,818	94,919,614	3,899,896	3,626,814	3,889,896	242,913	988,246	647,847,747	761,981,282
Mississippi	66,444,246	94,939,281	2,266,473	2,193,472	3,607,360	242,913	341,242	321,639,446	464,121,424
Missouri	73,564,204	81,357,537	3,196,517	3,095,463	5,067,632	261,622	737,956	616,309,546	616,183,970
Montana	17,365,032	18,364,208	630,474	1,209,922	1,029,622	242,913	13,781	80,622,161	126,287,833
Nebraska	23,804,477	37,336,488	1,702,881	1,261,769	1,664,867	242,913	179,830	191,626,460	267,302,686
Nevada	36,263,670	39,659,899	1,195,543	1,260,955	2,106,751	242,913	280,495	265,719,474	346,111,446
New Hampshire	16,473,827	28,730,833	808,198	1,099,922	961,942	242,913	80,098	134,627,444	178,894,931
New Jersey	91,489,892	193,348,717	6,932,495	6,999,844	4,727,738	399,894	1,026,700	891,424,167	1,180,697,381
New Mexico	40,421,656	45,572,747	1,700,726	1,451,370	2,212,181	242,913	213,290	212,315,677	305,112,880
New York	463,576,278	399,696,882	17,636,731	11,843,244	12,847,422	866,894	2,297,730	2,021,923,863	2,680,463,710
North Carolina	126,722,478	187,236,203	6,896,971	6,866,311	9,014,604	802,343	1,042,363	941,704,359	1,260,491,369
North Dakota	13,718,663	13,236,230	430,775	1,209,922	900,000	242,913	3,170	70,148,795	95,790,336
Ohio	186,208,279	218,888,026	6,679,679	7,204,805	10,794,901	909,170	1,392,956	1,190,892,244	1,620,880,519
Oklahoma	54,721,251	73,962,453	1,840,370	2,036,128	3,791,325	242,913	430,214	387,279,890	524,999,644
Oregon	46,867,822	61,466,718	1,999,966	2,362,736	3,622,267	242,913	463,292	382,606,676	522,814,116
Pennsylvania	380,339,879	213,569,111	7,247,517	7,132,917	10,462,371	662,899	1,637,847	1,276,798,638	1,717,689,757
Rhode Island	17,317,214	21,867,106	867,157	1,099,922	867,430	242,913	39,999	110,603,610	153,368,339
South Carolina	71,493,468	86,619,373	3,796,203	2,945,935	4,643,273	242,913	630,596	466,808,360	626,416,543
South Dakota	17,305,000	15,816,432	760,139	1,099,922	900,000	242,913	3,170	86,429,107	121,639,881
Tennessee	97,287,440	114,806,799	3,672,872	4,362,129	6,096,799	279,379	799,819	634,898,686	861,668,833
Texas	473,989,894	473,989,894	12,164,211	19,739,211	22,456,484	1,061,416	2,291,461	2,662,361,383	3,667,911,263
Utah	24,798,142	52,770,426	1,847,145	2,543,947	3,023,321	242,913	134,298	321,652,347	406,922,549
Vermont	12,582,703	12,880,011	498,050	1,099,922	900,000	242,913	3,170	67,931,278	81,549,040
Virginia	82,876,612	140,707,617	4,736,240	6,130,760	6,800,812	342,443	680,636	686,664,636	1,046,116,799
Washington	67,561,650	110,676,731	4,237,785	4,224,167	5,218,969	287,220	736,414	671,694,807	864,539,441
West Virginia	30,489,646	37,315,396	1,617,316	1,099,922	2,166,499	242,913	252,812	126,659,690	252,529,542
Wisconsin	73,984,722	104,100,364	4,818,988	3,499,837	5,026,439	349,731	687,448	687,448,684	779,844,923
Wyoming	13,295,624	12,602,240	562,737	1,209,922	900,000	242,913	3,170	55,395,732	64,153,540
American Samoa	3,513,261	116,295	-	10,636	102,299	22,529	-	-	3,763,395
Guam	4,480,488	266,176	-	26,814	277,141	22,629	-	-	4,913,629
Northern Mariana Islands	1,276,207	67,453	-	6,142	136,898	22,529	-	-	1,529,443
Puerto Rico	193,203,641	54,545,236	1,688,050	2,393,977	5,256,416	242,913	409,310	433,896,144	692,722,404
Outlying Areas (Guam)	-	-	-	-	-	-	-	179,698,000	179,698,000
Virgin Islands	4,721,110	162,596	-	13,877	176,462	22,629	-	-	5,036,547
Freely Associated States	-	-	-	-	-	-	-	-	-
Indian territories	36,198,836	-	-	-	-	-	-	-	36,198,836
Other (non-State allocations)	-	-	-	35,367,025	-	-	162,000	343,000	36,492,025
Total	6,009,310,000	6,863,800,000	200,000,000	260,000,000	270,000,000	16,200,000	34,300,000	30,662,820,000	49,676,138,280

State Share of ARRA – A Snapshot

- Although, the economic forecast is dim, Missouri stands to receive a healthy allocation from the Stimulus package including:
 - Title 1: \$147,619,766
 - Ed Technology: \$ 9,758,284
 - IDEA Part B: \$227,175,274
 - IDEA Part B (619 Pre-K): \$ 6,397,033
 - IDEA Part C: \$ 7,790,925
 - State Stabilization: \$920,748,576

- *Actual allocation for Education in 2008:*

\$ 540,908,105

- **Grand Total of ARRA Funds:**

\$ 1,335,683,148

How can SLPs use the ARRA Funds?

SLPs can request funds for :

professional development

- attending regional, state, or national conferences and conventions
- purchasing continuing education products
- contracting with experts to present on specific topics of interest

How can SLPs use the ARRA Funds?

- Purchasing new assessments
- Expanding library of interventions and other professional materials
- Obtaining computer programs for developing IEP documents and other data collection processes
- Seeking compensation for working during the summer or other times to develop training programs to present to teachers, administrators, parents, or others on topics

How can SLPs use the ARRA Funds?

- Developing systems to collect outcomes data
- Designing and engaging in a collaborative research project with local university staff
- Implementing assistive technology to develop a library for trial use of assistive technology
- Purchasing classroom amplification systems and/or items that would improve classroom acoustics
- Developing retention strategies, such as: mentoring/induction program, financial incentives (e.g., salary supplement, signing bonus, loan forgiveness), and training
- Getting laptops, smart boards, software, or other equipment to enhance delivery of services;
- Building collaborative teams (i.e., training, release time)
- Developing response to intervention resources and materials
- Developing/purchasing curriculum based materials and assessments to support state and local curriculum
- Providing compensatory services due to vacancies or absences

Federal Issues

The Higher Education Opportunity Act (HEOA):

- Signed into law on August 15, 2008; reauthorizes the Higher Education Act (HEA) of 1965, extends HEA funding provisions, and includes several measures to make postsecondary education more affordable and accessible.
- Creates a new program that allows professionals working in areas of national need to qualify for loan forgiveness, including school-based Speech-Language Pathologists and Audiologists. Up to \$2,000 in a year for no more than five years and up to \$10,000 in outstanding loans would be forgiven.
- Currently, the funding for this program has not been appropriated.
- **Major Issues for SLPs and Audiologists under HEOA:**
 - Loan Forgiveness
 - Accreditation
 - Inclusion in Teacher Preparation

The Medicare Improvements for Patients and Providers Act of 2008

Summary of changes:



On July 16, 2008 the Medicare Improvements for Patients and Providers Act (MIPPA) of 2008 was passed, which included a provision that will allow speech-language pathologists in private practice to directly bill the Medicare program effective **July 1, 2009**. It would also recognize audiologists as eligible to receive a bonus payment under Medicare's quality reporting initiative. Both provisions are currently going through the regulatory phase at the Centers for Medicare and Medicaid Services (CMS).

More on MIPPA

The new law will also allow Medicare to continue reimbursing providers at the 2008 physician fee schedule rates, and increase Part B payment 1.1% for 2009. The therapy cap exceptions process is extended through December 2009. CMS has been holding claims since July 1, in anticipation of Congressional action, and will adjust payments as necessary.

What's next?

- Effective July 1, 2009, private practice SLPs will be permitted to enroll in the Medicare program and treat Medicare beneficiaries. ASHA has developed preliminary FAQs to address some basic questions:
<http://www.asha.org/members/issues/reimbursement/medicare/medicarefaqslprivateprac>
- For the latest developments and upcoming educational opportunities, please visit:
<http://www.asha.org/members/issues/reimbursement/medicare/SLPprivatepractice.htm>

What's next?

- ASHA is currently working with CMS to develop the regulations and policies related to SLP Medicare private practice which includes identifying a date by which SLPs can begin enrolling into the Medicare program. For questions related to Medicare SLP private practice, please contact reimbursement@asha.org
- Additional resources related to Medicare SLP private practice on the Billing and Reimbursement section of ASHA's Web site throughout the year:
<http://www.asha.org/members/issues/reimbursement/>

Early Hearing Detection and Intervention Act of 2007

- Early Hearing Detection and Intervention (EHDI) grants were first authorized in the Newborn Infant Hearing Screening and Intervention Act of 1999 and provide federal funds for state grants to develop infant hearing screening and intervention programs.
- Congress reauthorized these grants in 2001 and included provisions related to early hearing screening and evaluation of all newborns, coordinated intervention, rehabilitation services, and research.



EHDI Act of 2007

- H.R. 1198 and S. 1069 would reauthorize the EHDI grant program and put greater emphasis on diagnosis and treatment.
- H.R. 1198 passed the House of Representatives on April 8, 2008 and S. 1069, the Senate companion bill, is currently in committee.

Other National Issues

- **Direct Access to Audiologists:**
 - The Medicare Hearing Health Care Enhancement Act of 2007, **H.R. 1665** and **S. 2352** would give Medicare beneficiaries the option of going directly to a qualified audiologist for hearing and balance diagnostic tests and other audiological services. Currently, these individuals must obtain a physician referral before seeing an audiologist.
- **Individuals with Disabilities Education Act (IDEA) Funding:**
 - Support for an increase of \$2 billion in fiscal year 2009 appropriations for IDEA Part B Grants to States.
 - **H.R. 821** and **S. 1159** would increase federal funding for IDEA with mandatory funds over the next eight years and would ensure that the federal government “fully fund” its commitment to pay 40% of IDEA.
- H.R. 1165, S. 2352, H.R. 821, and S. 1159 are currently in committee.

Other National Issues

- IDEA Reauthorization:
 - ASHA submitted comments to the U.S. Department of Education in response to its notice of proposed rulemaking (NPRM) that would amend the regulations governing the Assistance to States for the Education of Children with Disabilities Program and Preschool Grants for Children with Disabilities Program, as published in the August 14, 2006 *Federal Register*. These regulations implemented changes made to IDEA, as amended by the Individuals with Disabilities Education Improvement Act of 2004.

Other National Issues

- **No Child Left Behind (NCLB) Reauthorization:**
 - Efforts to begin the re-authorization process began in 2007 and will continue until a new law is passed by Congress and signed by the President.
 - ASHA submitted comments to the U.S. Department of Education's NPRM on Title 1 of the No Child Left Behind Act in the April 23, 2008 *Federal Register*.

For further information on IDEA or NCLB, please contact Catherine D. Clarke, ASHA's Director of Education and Regulatory Advocacy, at cclarke@asha.org or by phone at 800-498-2071, ext. 5611, or visit the IDEA and NCLB sections of ASHA's web site.

State legislative trends

- Reduction in Reimbursement rates for Early Intervention Services (SD, AZ)
- Elimination of coverage for SLP and other related services under state insurance plans (MN)

State Legislative Trends (con't)

- Insurance coverage for autism services (AX, AR, CO, CT, IA, FL, GA, KS, KY, ME, MD, MA, MI, MN, MS, MO NH, NY, NC, OH, OR, TN, UT, VA, WA WI, (MT and NM passed)
- Telehealth/telemedicine provisions: 9 states have provisions in their practice act (DE, GA, IA, KY, LA, ME, MD, OK, WY) legislative bills in ME, PA, NH, and KY (regulations)
- ASHA developing standards and legislative model language in 2009

State Legislative trends (con't)

- Insurance coverage for Cochlear Implants: RI, IL, MA, NE, TX (WI passed)
- Hearing Aid insurance coverage: HI, NY, WI, IL, IA, MA, MS, MO, NH, NC, OR, TN (AR passed and CT expanded coverage)

EHDI at the State Level

- Currently, 46 states, 2 territories, and the District of Columbia have EHDI laws or voluntary compliance programs that screen the hearing.
- **Summary of Ohio EHDI laws and regulations:**
 - The Department of Health (DOH) maintains a statewide hearing screening, tracking, and early intervention program; screenings and re-screenings are required when necessary; requires referrals for failed screenings; and a reporting system for results of screenings and evaluations provided to parents, primary care physicians, and DOH.
 - DOH is also responsible for establishing protocols for the treatment and follow-up care of newborns and infants with hearing impairment, as well as personnel training programs.
 - EHDI Phase II – Tracking and Intervention
- **ASHA's EHDI Phase II Model Bill:** focuses on tracking, follow-up, privacy, early intervention opportunities, and coverage of services.
- Hearing Screening Across a Lifetime

Other issues for interest

- Classroom Acoustics
 - Priority under ASHA's Public Policy Agenda
 - ASHA working with Access Board to align ANSI standards with International Building Code
 - Internal ASHA committee working on model legislative language/bond referendum for states

Other issues of Interest

- Comprehensive licensure: 14 states require a license for practice in any setting;
- CT, DE, HI, KS, IN, LA, MA, MT, NM, OH, TX, VT, MD
- Michigan passed comprehensive licensure for SLP in 2008
- Two states have no licensing provisions for SLPs: CO and SD

Questions???

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