

Submitted via email: ann.johnson@house.texas.gov

February 6, 2023

The Honorable Ann Johnson 1100 Congress Avenue Capitol Extension, Room E2.416 Austin, TX 78701

RE: HB 667 Music Therapy

Dear Represenative Johnson:

On behalf of the American Speech-Language-Hearing Association (ASHA), I write to express concern on HB 667, which licenses music therapists, and to offer amendments that have been agreed to by ASHA and the American Music Therapy Association (AMTA).

ASHA is the national professional, scientific, and credentialing association for 223,000 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students. Audiologists specialize in preventing and assessing hearing and balance disorders as well as providing audiologic treatment, including hearing aids. Speech-language pathologists (SLPs) are uniquely educated and trained to assess and treat speech, language, swallowing, and cognitive communication disorders in children and adults. These services help children acquire language and enable people to recover essential skills to communicate about their health and safety, to swallow adequate nutrition safely, and to have sufficient attention, memory, and organizational skills to function in their environment. Over 16,000 ASHA members reside in Texas.¹

ASHA appreciates the language included in HB 667, which states that music therapists do not screen, diagnose, or assess physical, mental or communication disorders. ASHA also appreciates requiring collaboration between music therapists and SLPs. Finally, we appreciate the intent that music therapists may not represent to the public that they are authorized to treat communication disorders.

Although the AMTA's scope of practice for music therapy was revised in 2015, it did not address the treatment of communication disorders.² To avoid overlap in scopes of practice between SLPs and music therapists, ASHA and AMTA agreed to a series of provisions.

In respect of this partnership, I request that the bill be amended to add the following agreed upon provisions that are currently missing from HB 667.

- Unless authorized to practice speech-language pathology, music therapists may not evaluate, examine, instruct, or counsel on speech, language, communication, and swallowing disorders and conditions.
- Before providing music therapy services to a client for an identified clinical or developmental need, the licensee shall review with the health care provider(s) involved in the client's care the client's diagnosis, treatment needs, and treatment plan.
- Before providing music therapy services to a student for an identified educational need, the licensee shall review with the IFSP [individualized family service plan] or IEP

[individualized education program] team the student's diagnosis, treatment needs, and treatment plan.

- During the provision of music therapy services to a client, the licensee collaborates, as applicable, with the client's treatment team, including physician, psychologist, licensed clinical social worker, or other mental health professional.
- During the provision of music therapy services to a client with a communication disorder, the licensed professional music therapist shall collaborate and discuss the music therapy treatment plan with the client's audiologist or speech-language pathologist.

Thank you for considering ASHA's amendments to this legislation. If you or your staff have any questions, please contact Tim Boyd, ASHA's director, state healthcare and education affairs, at tboyd@asha.org.

Sincerely,

Robert Margustine Robert M. Augustine, PhD, CCC-SLP

2023 ASHA President

¹ American Speech-Language-Hearing Association. (2022). *Texas* [Quick Facts]. https://www.asha.org/siteassets/advocacy/state-fliers/texas-state-flyer.pdf

² American Music Therapy Association. (2015). Scope of Music Therapy Practice. https://www.musictherapy.org/about/scope of music therapy practice/.