



November 16, 2021

Nita Kumar, Rules Coordinator  
Oregon Health Authority  
Health Systems Division  
Medical Assistance Programs  
500 Summer St. NE  
Salem, OR 97301

Re: Proposed Telemedicine Rules

Dear Ms. Kumar:

On behalf of the American Speech-Language-Hearing Association, I write to support the proposed telemedicine rules implementing HB 2508 with clarifying language.

The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for 218,000 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students. Over 2,100 ASHA members reside in Oregon.<sup>1</sup>

As the leading national organization for the certification and advancement of audiologists and speech-language pathologists (SLPs), ASHA supports the development and use of telemedicine or “telepractice.” ASHA maintains a collection of professional practice documents, including a position statement that defines telemedicine/telepractice as “the application of telecommunications technology to deliver professional services at a distance by linking clinician to client, or clinician to clinician for assessment, intervention, and/or consultation.”

These documents include a technical report and service delivery guidelines that may be accessed on ASHA’s website at <http://www.asha.org/Practice-Portal/Professional-Issues/Telepractice/>.

ASHA strongly supports the use of telemedicine/telepractice and reimbursement of telemedicine/telepractice at the same level as in-person practice. Our concerns pertain to Section 410-120-1990: Telemedicine and Telehealth Delivered Health Care Services (11), which states:

“Providers shall ensure OHP clients or members are offered a choice of how services are received, including services offered via a telemedicine or telehealth modalities and in-person services, except where the Authority issues explicit guidance during a declared state of emergency or if a facility has implemented its facility disaster plan.”

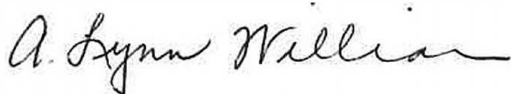
ASHA proposes that this language should be further clarified because it can be interpreted as a requirement for a telehealth provider to be able to offer in-person services, which is contrary to the intent of telemedicine. An additional sentence should be added stating “telehealth and telemedicine providers shall not be required to offer services in person.” Clients have the opportunity in Section 13 (a) to consent to the provision of the telehealth and telemedicine services.

Research demonstrates the equivalence of telemedicine/telepractice to in-person service delivery for a wide range of diagnostic and treatment procedures for adults and children.<sup>2</sup> Studies have shown high levels of patient, clinician, and parent satisfaction supporting telemedicine/telepractice as an effective alternative to the in-person model for delivery of care.<sup>3</sup> Telemedicine/telepractice expands the availability of practitioners for those in need—regardless of geographic location—saving time and resources for both the provider and the patient.

Despite proven benefits, telemedicine/telepractice remains underutilized within audiology and speech-language pathology practices due to a lack of clear state laws governing its use or mandating appropriate reimbursement for services delivered. By further clarifying these regulations, ease of access to services via telemedicine/telepractice will continue to be ensured for patients in Oregon.

Thank you for your consideration of ASHA's position on the proposed telemedicine regulations. If you or your staff have any questions, please contact Eileen Crowe, ASHA's director, state association relations, at [ecrowe@asha.org](mailto:ecrowe@asha.org).

Sincerely,



A. Lynn Williams, PhD, CCC-SLP  
2021 ASHA President

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<sup>1</sup> American Speech-Language-Hearing Association. (2020). *Oregon* [Quick Facts]. <https://www.asha.org/siteassets/uploadedfiles/Oregon-State-Flyer.pdf>.

<sup>2</sup> Grogan-Johnson, S., Alvares, R., Rowan, L., & Creaghead, N. (2010). A pilot study comparing the effectiveness of speech language therapy provided by telemedicine with conventional on-site therapy. *Journal of Telemedicine and Telecare*, 16, 134–139.

<sup>3</sup> Ibid.