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October 27, 2025

Tyler Sadwith  
State Medicaid Director  
California Department of Health Care Services  
P.O. Box 997413, MS 0000  
Sacramento, CA 95899-7413

RE: Concerns Regarding Required Coverage of Speech Therapy Services for Medi-Cal Members

Dear Director Sadwith:

On behalf of the American Speech-Language-Hearing Association (ASHA) and the California Speech-Language-Hearing Association (CSHA), we are writing to express concern about widespread reports from ASHA member speech-language pathologists (SLPs) regarding Kaiser Permanente's administration of speech therapy services for Medi-Cal beneficiaries. These reports suggest serious and ongoing violations of the Early and Periodic Screening Diagnosis and Treatment (EPSDT) benefit, which guarantees coverage for all medically necessary services for children under age 21.

ASHA is the national professional, scientific, and credentialing association for 241,000 members, certificate holders, and affiliates who are audiologists; SLPs; speech, language, and hearing scientists; audiology and speech-language pathology assistants; and students. Over 17,000 ASHA-certified SLPs reside in California. CSHA represents over 3,000 audiologists, SLPs, audiology and speech-language pathology support personnel, and students who provide life-changing support to those with speech, hearing, and language challenges.

Many ASHA and CSHA members provide speech-language pathology services to Medi-Cal beneficiaries under the EPSDT benefit, often as contracted outside vendors to Kaiser. In addition to serving children and teens, many members specialize in early intervention and work with some of the state's most vulnerable Medi-Cal beneficiaries with communication and language disorders. Since October 2024, these providers have consistently reported that Kaiser requires SLPs to discharge patients after a fixed number of sessions—regardless of the patient's condition, clinical judgement, or patient progress. While ASHA recognizes that EPSDT permits prior authorization and other utilization management techniques, federal law prohibits fixed caps or limits on the number of sessions when documented as medically necessary.

ASHA and CSHA met with Kaiser representatives in January 2025 to discuss these concerns. Kaiser staff indicated they would review the issue but did not follow up. In August 2025, CSHA sent a formal request for another meeting; after resending the letter three times, CSHA received a response in late September 2025 stating that Kaiser does not impose predetermined session limits and declined to meet with CSHA. This response is inconsistent with more than 25 ASHA member reports documenting strict discharge policies after a certain number of therapy sessions has occurred, without regard to medical necessity.

These practices severely restrict access to medically necessary therapy for some of the state's most vulnerable children. Medi-Cal patients already face significant barriers finding in-network providers due to lower reimbursement rates, high administrative and paperwork burdens, and prior authorization requirements. Inappropriate discharges that contravene EPSDT obligations exacerbate these inequities for this population.

We respectfully request that the Department of Health Care Services review Kaiser Permanente's compliance with EPSDT coverage requirements and take action to ensure that Medi-Cal beneficiaries, can access speech-language pathology services in the amount, duration, and scope required by federal law. ASHA and CSHA would also welcome the opportunity to discuss these issues and support the Department's efforts to strengthen compliance.

Thank you for your attention to this matter. If you have any questions, please contact Caroline Bergner, ASHA's director for health care policy for Medicaid, at [cbergner@asha.org](mailto:cbergner@asha.org).

Sincerely,



A. B. Mayfield-Clarke, PhD, CCC-SLP 2025  
ASHA President



Sarah Bishop, CCC-SLP  
2025 CSHA President