



The Economic Value of Speech-Language Pathology Services: Newborn Through Adolescence



Policy Impact: Investment in pediatric services delivered by speech-language pathologists (SLPs)—individually and as part of a multidisciplinary team—is a proven cost-savings strategy, with documented returns across health care, special education, and criminal justice systems.



SLPs in Inpatient Settings Reduce Health Care Costs

Following the introduction of multidisciplinary protocols with automatic initiation of SLP services, infants and children showed measurable improvements over pre-protocol outcomes.

43%

reduction in hospital costs¹

- Children who are chronically ventilator-dependent had a **42%** shorter length of stay, with a **43%** reduction in hospital-related costs per episode of care.¹
- Infants born preterm reached full oral feedings **2 weeks** sooner and were **42%** less likely to require a feeding tube at discharge.²
- Infants who are medically complex had ICU stays that were **7 days** shorter, resulting in a projected **15%** reduction in costs.³
- Children who aspirate had a **50%** reduction in G-tube placement.⁴



SLPs in Post-Acute and Outpatient Settings Reduce Health Care Utilization

Following treatment in a multidisciplinary clinic with integrated SLP services, children required fewer healthcare services compared to pre-treatment needs.

48%

fewer emergency room (ER) visits⁵

- Children with complex aerodigestive disease had **48%** fewer ER visits and **40%** fewer primary care encounters.⁵
- Children with dysphagia showed even greater utilization reductions, with a **54%** decrease in ER visits.⁵
- Children with aerodigestive disorders experienced a **20%** reduction in care costs.⁶
- **61%** of children who are orally defensive and tube-dependent were fully weaned from tube feedings.⁷



SLPs in Early Intervention (EI) Reduce Downstream Support Needs

Following EI services with SLPs as core members of the multidisciplinary team . . .

- For every dollar spent on EI services, there was a **\$2** return on investment (ROI) by age 7 and a **\$4** ROI by age 18 due to preventing additional special education services.⁸
- **42%** of all children and **69%** of children at risk for developmental delay did not require special education services by kindergarten entry.⁹

EI for Children Who Are Deaf and Hard of Hearing

\$2.20

ROI for every \$1 spent on EI services through higher lifetime employment and fewer school support services¹⁰

10%

more likely to complete high school than the general population¹⁰

18%

more likely to complete high school than those with mild to moderate disability¹⁰

45%

more likely to become employed than individuals with disabilities or long-term health conditions¹⁰



Economic Benefits of Speech-Language Pathology Services for Children and Adolescents

\$6.43

ROI for every \$1 spent on services for children with specific language impairment based on increased lifetime earnings¹¹

\$1.46

ROI for every \$1 spent on SLP-led treatment for children on the autism spectrum based on improved independence and productivity¹¹

9%

reduction in lifetime youth justice system costs among children with communication disorders following SLP treatment¹²

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