

PRODUCTIVITY:

Advocacy Tools for Health Care SLPs and SLPAs

Learn more about productivity standards. Advocate for quality patient care and clinician well-being.

PRODUCTIVITY STANDARD

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Employers determine the direct and indirect activities that count towards patient care time.



ASHA encourages employers that establish a productivity standard to include any activity required for patient care – such as patient care coordination meetings, family training, and documentation. However, many employers consider “activity” to be only billable time. Productivity standards are not developed or required by payers and do not affect reimbursement.

AVERAGE PRODUCTIVITY STANDARDS

80%
PRODUCTIVITY
was the median
reported requirement

According to the [2025 ASHA SLP Health Care Survey](#)

40%
OF SLPs REPORTED
nothing counts when
patients are not present

PRODUCTIVITY DEVELOPMENT

Labor expenses can represent more than **50%** of a health care organization's total expenses and as **much as 80%** for contract companies. It may cost an organization **1.25-1.4 times** an employee's salary to cover expenses such as payroll taxes, benefits, retirement, and overhead.

Employers consider several factors when establishing a productivity target.



Patient-Specific Variables

(e.g., medical complexity)



Rehabilitation Discipline-Specific Variables

(e.g., available CPT codes)



Setting-Specific Variables

(e.g., Federal payment systems e.g., PDPM in skilled nursing facilities)



Organization-Specific Variables

(e.g., proportion of salaried staff to contract staff)

Productivity standards, payer policies, or other administrative mandates cannot overshadow medical necessity or clinician ethics.

Compare
Productivity by
Facility Type

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HOW TO INFLUENCE STANDARDS IN YOUR FACILITY



Get to know your organization.

- Is your employer for-profit or non-profit? What is your supervisor's professional background? With which companies does your organization contract?
- What is the turnover or vacancy rate for clinicians? What is the relationship between high productivity requirements and professional burnout?
- Are there active quality improvement initiatives that require your time?



Show how you spend your time.

Capture all of the activities required to effectively manage your caseload. Think about additional activities beyond documentation – for example, team meetings, staff trainings, and care coordination activities.



Know how your productivity stacks up.

Review [ASHA's Health Care Survey: Practice Issues](#). Compare your organization's standard to that of other organizations in a similar setting. Optimize varied [service delivery](#) when it's clinically appropriate.



Demonstrate your value.

Gather information about how your services help prevent hospitalizations, shorten length of stay, reduce re-admissions, impact patient-reported outcomes and satisfaction ratings, and support compliance.



Know your rights as an employee.

- Talk to your human resources department or labor attorney if your organization pressures you to work "off the clock." The [Fair Labor Standards Act](#) protects non-exempt employees from feeling required to complete job tasks outside of contracted hours to meet an organization's unreasonable productivity standards.
- Defend the importance of using [clinical judgment](#) [PDF], and understand your [reporting obligations](#) [PDF] to corporate compliance if you identify employee rights issues.