



June 16, 2020

Dear Medicaid Director:

On behalf of the American Speech-Language-Hearing Association, I write to thank you for temporarily expanding telehealth coverage during the public health emergency and request permanently extending coverage of telehealth services provided by audiologists and speech-language pathologists. Ensuring continuity of medically necessary care related to audiology and skilled therapy services is critical to prevent negatively impacting patient function and outcomes.

The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for 211,000 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students.

As the pandemic continues, minimizing the spread of COVID-19 remains critical, and each stakeholder must do what they can to help reduce the risk of exposure. Temporarily extending access to telehealth services throughout the pandemic represents an efficient and effective means to facilitate continued access to medically necessary care for beneficiaries and allows providers to continue their work during social distancing and increased isolation.

The demonstrated effectiveness of telehealth speaks to the value of **permanently extending telehealth coverage for all clinically appropriate services**. A recent study from Children's Hospital of Philadelphia, including speech-language pathology services, demonstrated that 86% of patients and caregivers were interested in continuing to receive future care via telehealth.¹ In addition, the clinical teams involved found telehealth to be clinically appropriate and effective 93% of the time.²

Research demonstrates the efficacy of telehealth and its equivalent quality as compared to in-person service delivery for a wide range of diagnostic and treatment procedures for adults and children.³ Studies have shown high levels of patient, clinician, and parent satisfaction supporting telehealth as an effective alternative to the in-person model for delivery of care.⁴ This reinforces that only clinically appropriate delivery or use of telehealth by audiologists and speech-language pathologists (SLPs) must be equivalent to the quality of services provided in person in order to remain in compliance with ASHA's Code of Ethics.⁵

Telehealth expands practitioners' availability to those in need—regardless of geographic location, mobility challenges, or even state of quarantine or social distancing—saving critical time and resources for both patients and providers. ASHA is fielding surveys to our members and their patients regarding their experience with expanded telehealth coverage and we will share details of those surveys once available. ASHA has also received positive comments from both clinicians and consumer alike on the effectiveness of telehealth service delivery. Several ASHA members noted improved treatment compliance while using telehealth with missed visits dropping significantly.

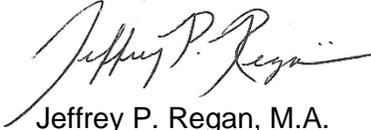
Despite the proven benefits of telehealth, it remains underutilized across many health care professions, including audiology and speech-language pathology, due to a lack of uniform health plan coverage and reimbursement for services delivered. ASHA urges you to provide

your subscribed members ongoing access to telehealth services provided by audiologists and SLPs.

To support implementation, ASHA has developed a collection of professional practice resources including the attached recommended guidance for implementing telehealth coverage for audiology and speech-language pathology services. The guidance includes recommended codes, modifiers, place of service codes, and clinical vignettes to describe examples of clinically appropriate telehealth services.

Thank you for considering ASHA's request to permanently extend coverage of telehealth services including audiology and speech-language pathology services for beneficiaries of your health plan. If you or your staff have any questions, or require further information in order to assist with implementation, please contact Tim Nanof, ASHA's director of health care & education policy, at tnanof@asha.org or 301-296-5676.

Sincerely,



Jeffrey P. Regan, M.A.
ASHA's Director of Government Affairs & Public Policy

Attachment:
ASHA Recommendations for Telehealth Coverage

¹ Rametta, S. C., et al. (2020). *Analyzing 2,589 child neurology telehealth encounters necessitated by the COVID-19 pandemic*. *Neurology*. 10.1212. Retrieved from <https://n.neurology.org/content/early/2020/06/09/WNL.000000000010010>.

² Ibid.

³ Grogan-Johnson, S., Alvares, R., Rowan, L., & Craghead, 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.

⁴ Ibid.

⁵ American Speech-Language-Hearing Association. (2016). *Code of Ethics*. Retrieved from <https://www.asha.org/Code-of-Ethics/>.