



AMERICAN
SPEECH-LANGUAGE-
HEARING
ASSOCIATION

2009 Public Policy Agenda

Introduction

The ASHA Government Relations and Public Policy Board (GRPPB) is charged with developing an annual public policy agenda that prioritizes the advocacy activities of the Association and, in particular, the Government Relations and Public Policy (GRPP) Cluster.

Issue objectives were identified by ASHA members, committees, and staff. Expanding its peer review process, over 1000 comments were received and reviewed for the 2009 agenda. The issue objectives were then developed through the GRPPB and prioritized to focus and strategically plan the Association's advocacy activities. The GRPPB members responsible for this agenda are Linda Tepperman (chair), Martin Audiffred, Craig Champlin, Linda Jacobs-Condit, Roberta Krebs, Joan Mele-McCarthy, Ninevah Murray, J. Timothy O'Neill (public member), Carolyn Wiles Higdon, DeAnne Wellman Owre (monitoring vice president), and James Potter (ex-officio).

The issue objectives are intended to address the major public policy concerns of audiologists, speech-language pathologists, and speech, language, and hearing scientists. Each issue objective for the year is assigned to one of four priority levels based on (a) its importance to the Association's members and/or those they serve, (b) level of resources required to make progress, and (c) its immediacy and likelihood that meaningful action will occur.

Each of the 2009 issue objectives was assigned to one of the following four categories:

- Highest Priority** – requires immediate federal or state legislative or regulatory attention and requires major resources on the Association's part;
- Priority** – is important to the Association -- activities to be determined as opportunity and available resources permit;
- Monitoring** – is relevant to the Association, but will be acted upon only when specific opportunities arise or conditions change member needs and priorities;
- Planning** – requires a concerted planning effort in order to develop specific objectives that can then be prioritized and acted upon.

The order of the issue objectives within each category is not a reflection of their relative level of importance or the resources expended throughout the year. And it should be noted that this list of issue priorities is not absolute. Since the course of Congress, state legislatures, or federal and state agencies can change, the Government Relations and Public Policy Board and GRPP Cluster view the placement of these objectives as flexible. If a particular issue becomes more visible politically or appears to be headed toward consideration, the Association's level of activity will be adjusted accordingly.

The GRPPB also engages annually in strategic planning to address both emerging and long-range issues. This facilitates the preparation of attainable, measurable objectives for the Association's annual public policy agenda. The GRPPB will be responsible for submitting an annual report on the success of the 2009 Public Policy Agenda.

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ISSUE OBJECTIVES

I. Highest Priority - *requires immediate federal or state legislative or regulatory attention and requires major resources on the Association's part.**

- A. Promote state/federal financial aid policies and research funding opportunities, while collaborating with state agencies/CSD programs to support recruitment and retention of 1) masters and doctoral students and 2) clinicians in educational and healthcare settings.
- B. Promote the autonomy of audiologists through direct patient access and comprehensive coverage of audiology services for Medicare beneficiaries.
- C. Support increased funding of Individuals with Disabilities Education Act (IDEA) and the following outcomes: 1) establishment of effective service delivery and manageable workloads to maximize student outcomes; 2) participation in early intervening activities using the Response-to-Intervention (RTI) model (Part B) and increased access to appropriate early intervention services (Part C); 3) increased professional development through dissemination of information about research-based practices in speech-language pathology and audiology; and 4) monitor the effective utilization of federal stimulus funds targeted for education.

II. Priority - *is important to the Association -- activities to be determined as opportunity and available resources permit.**

- A. Further the adoption of the standards in the Certificates of Clinical Competence (CCCs) to ensure that ASHA member standards are maintained in federal and state legislative and/or regulatory actions, including alignment of NCLB and IDEA standards, and to link the CCCs with salary increases for ASHA members.
- B. Promote appropriate eligibility criteria, improved coverage policies and reimbursement rates for assistive devices, and diagnostic, habilitation and rehabilitation services provided by audiologists and speech-language pathologists in early detection and intervention (EHDI) programs, Medicare, state Medicaid and private health plans across the age span.
- C. Ensure that appropriate professional work and technical components for audiology and speech-language pathology services are included in Medicare fee schedule payment rates.
- D. Repeal, develop alternatives, or continue to prevent implementation of the therapy cap on speech-language pathology services under the Medicare Part B outpatient program.
- E. Support laws and regulations for classroom acoustics and amplification systems using ANSI 2002 standard in school building construction.
- F. Assist members to better identify and use the available funding sources to provide quality services to clients across the life span.
- G. Promote access, coverage, quality standards and payment of audiology and speech-language pathology telepractice services to underserved health and education settings through legislation, regulation, or credentialing processes.
- H. Promote use of a growth model to assess students with disabilities and meet the requirements of adequate yearly progress (AYP) under the reauthorization of the No Child Left Behind (NCLB) Act, and consider legislative or regulatory remedies for inconsistencies created between NCLB and IDEA.

* Each issue objective is assigned to one of four priority levels based on (a) its importance to the Association's members and/or those they serve; and (b) its immediacy and likelihood that meaningful action will occur.

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- I. Conform federal and state policies that regulate the use of support personnel to be consistent with ASHA's criteria for appropriate training, supervision, and the delineation of job responsibilities to clearly distinguish them from licensed and certified audiologists and speech-language pathologists.

III. **Monitoring** - *is relevant to the Association, but will be acted upon only when specific opportunities arise or conditions change member needs and priorities.**

- A. Encourage federal, state and local policies and research that demonstrate the shared role of and need for speech-language pathologists and audiologists in assisting students to achieve success in literacy.
- B. Support the federal regulations that enforce standards to protect employees from noise-induced hearing loss or injury in the workplace, including the Occupational Safety and Health Administration's (OSHA) record keeping rulemaking, and recognition of audiologists as autonomous professionals responsible for occupational hearing conservation in accordance with National Institute of Occupational Safety and Health (NIOSH) recommendations.
- C. Advocate with the Centers for Medicare and Medicaid Services (CMS) and administrative contractors for the adoption of revised medical review guidelines for speech-language pathology and dysphagia.
- D. Develop and submit identified diagnostic code changes for the ICD coding systems for audiology and speech-language pathology services to the National Center for Health Statistics.
- E. Support modification of the Social Security retirement benefits laws (e.g. Government Pension Offset and Windfall Elimination Provision) for employees in the public sector (health care and education) and influence current regulations and future legislation.
- F. Support the Employment Non-Discrimination Act (ENDA) legislation and Association policies that promote non-discrimination based on gender, race, sexual orientation, cultural or ethnic heritage.
- G. Promote revision of the current Food and Drug Administration's (FDA) "Conditions for Hearing Aid Sales" and online dispensing regulations.
- H. Determine the impact of "free-trade" agreements, such as North American Free Trade Agreement (NAFTA), Central America Free Trade Agreement (CAFTA), (and the planned North American Union) as to how they impact the supply of qualified speech-language pathologists and audiologists in the United States.
- I. Advocate for increased diagnostic, treatment and community re-entry services for individuals with Traumatic Brain Injury (TBI).

IV. **Planning** - *requires a concerted planning effort in order to develop specific objectives that can then be prioritized and acted upon.**

- A. Increase availability of research funding opportunities and evidence-based practice through the National Institutes of Health (NIH), Department of Education (ED), Agency for Healthcare Research & Quality (AHRQ), Veterans Health Administration (VHA), and National Institute for Occupational Safety and Health (NIOSH), with emphasis on Early Hearing Detection & Intervention (EHDI).

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