



AMERICAN
SPEECH-LANGUAGE-
HEARING
ASSOCIATION

April 26, 2018

Chris Andresen
Department of Public Health
410 Capitol Avenue - MS #12APP
P.O. Box 340308
Hartford, CT 06134-0308

Re: Clinical Fellowship/Supervised Clinical Experience Licensure

Dear Mr. Andresen:

On behalf of the American Speech-Language-Hearing Association, I write to share the significance of supporting licensure for individuals working on their clinical fellowship experience, which is also referred to as the supervised professional experience.

The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for 198,000 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students. Over 2,500 of our members reside in Connecticut.

Upon completion of a graduate program in speech-language pathology, a speech-language pathologist (SLP) generally pursues state licensure and obtains ASHA's Certificate of Clinical Competence in Speech-Language Pathology (CCC-SLP). Both require a minimum number of supervised clinical experience hours. The majority of states (including Connecticut) have adopted the clinical fellowship requirement, or supervised professional experience, as a qualification for initial licensure. Currently, 46 states provide a license for clinical fellows working during the clinical fellowship experience. However, Connecticut's reluctance to issue a clinical fellow/supervised professional experience license to these individuals impacts their ability to provide services that are reimbursable under Medicare, Medicaid, and other private insurers.

Supervised Professional Experience/Clinical Fellowship

Under current licensing requirements, individuals in Connecticut must:

... (2) possess a master's or doctorate degree in speech and language pathology from a program accredited, at the time of the applicant's graduation, by the Educational Standards Board of the American Speech-Language-Hearing Association or such successor organization as may be approved by the department, or has completed an integrated educational program which, at the time of the applicant's completion, satisfied the educational requirements of said organization for the award of a certificate of clinical competence;

(3) has satisfactorily completed a minimum of thirty-six weeks, including not less than one thousand eighty hours of full-time, or a minimum of forty-eight weeks, including not less than one thousand four hundred forty hours of part-time professional employment in speech and language pathology under the supervision of a licensed or certified speech and language pathologist. Such employment shall follow the completion of the educational requirements of subdivision (2) of this subsection and shall consist of at least six sessions of supervision per month providing a total of at least four hours of supervision per month, at least two sessions of which shall provide a total of at least two hours of direct on-site observation of speech and language pathology services provided by the applicant.

To obtain ASHA's Certificate of Clinical Competence in Speech-Language Pathology (CCC-SLP), individuals are required to complete a mentored clinical fellowship experience. The clinical fellowship requires the completion of a 9-month full-time supervised professional employment experience upon completion of academic coursework and clinical practicum. A clinical fellow is supervised by a speech-language pathologist (SLP) who has obtained ASHA's CCC-SLP.

The similar requirements for both Connecticut's licensure and ASHA's CCC-SLP are to provide transition from an academic and clinical program to professional practice by helping college graduates:

- 1) integrate and apply the theoretical knowledge gained from academic training in the employment setting;
- 2) evaluate his or her strengths and limitations; and
- 3) develop and refine clinical skills related to caseloads, developing treatment goals, and providing assessment and treatment to individuals with communication disorders.

Supervised Professional Experience/Clinical Fellowship License & Insurance Reimbursement

Connecticut is one of a few states (Hawaii, Massachusetts, and Tennessee) along with Washington, DC, that does not license clinical fellows. Federal law has recognized licensure as the requirement for Medicare reimbursement. Medicaid and many private insurers have followed this requirement. Under this model, registration or permits would not be adequate. This has created problems for clinical fellows, sometimes resulting in losing their positions or not being hired because the facility cannot bill for their services. Therefore, hiring shortages for facilities in need of qualified speech-language pathology practitioners has occurred.

Through 2026, employment demand for speech-language pathologists is projected to grow 18%, much faster than the average for all occupations.¹ While ASHA recognizes that insurance reimbursement is not necessarily an area of concern for the state, we want to bring this issue to your attention because the lack of reimbursement may lead to increasing health care provider shortages in Connecticut. Provider shortages impact the citizens of Connecticut who need access to speech-language pathology services to treat an illness or injury (e.g., stroke, traumatic brain injury). Kaiser Family Foundation data shows that in 2015 there were over 630,300 Medicare

beneficiaries in Connecticut.² Furthermore, clinical fellows may seek employment in other states that allow them to practice with a provisional license without restriction.

Work Permits Do Not Fulfill Billing Requirements

ASHA recognizes Connecticut's desire to issue a permit to individuals completing their supervised professional experience, but this will not allow them to bill Medicare. According to Section 1861 of the Social Security Act (the federal law that dictates coverage guidelines for the Medicare program):

The term "qualified speech-language pathologist" means an individual with a master's or doctoral degree in speech-language pathology who:

- i. is licensed as a speech-language pathologist by the State in which the individual furnishes such services, or,
- ii. in the case of an individual who furnishes services in a State which does not license speech-language pathologists, has successfully completed 350 clock hours of supervised clinical practicum (or is in the process of accumulating such supervised clinical experience), performed not less than 9 months of supervised full-time speech-language pathology services after obtaining a master's or doctoral degree in speech-language pathology or a related field, and successfully completed a national examination in speech-language pathology approved by the Secretary.

Currently, 50 states offer licensure to SLPs; therefore, section (ii) of the Act does not afford protection to clinical fellows in states that license SLPs but do not license clinical fellows.

It is important to understand that regulations issued by the Medicare program are intended to interpret federal law. Given that licensure is required by Medicare for reimbursement, individuals in states that do not license clinical fellows are essentially considered students despite graduating from a two-year accredited master's program. This has significant practical implications for clinical fellows practicing in outpatient settings (e.g., clinics, private practices) paid under Part B of the Medicare benefit. As outlined in Section 230.B.1 of Chapter 15 of the Medicare Benefit Policy Manual, a therapist may bill and be paid for services provided by students when the "qualified practitioner is present and in the room for the entire session." The student may participate "in the delivery of services when the qualified practitioner is directing the service, making the skilled judgment, and is responsible for the assessment and treatment." Section 230.B.1 further states that billing and payment are appropriate when the "qualified practitioner is present in the room guiding the student in service delivery when the therapy student...(is) participating in the provision of services, and the practitioner is not engaged in treating another patient or doing other tasks at the same time."

In the case of a clinical fellow who does not possess a license, two qualified providers would be serving a patient with only one provider's services reimbursed. This practice would restrict patient access as employers would not hire clinical fellows if a clinical fellow requires direct in-room supervision by a qualified SLP.

Opposition to Removing Clinical Fellowship Requirement for Licensure

ASHA would like to address Connecticut's suggestion for removing the clinical fellowship requirement as part of the licensure process and to license SLPs immediately upon graduation. We would like to convey the possible consequences in doing so:

- 1) Individuals in Connecticut would not be able to apply for their ASHA-CCC if Connecticut were to remove the requirement for clinical fellowship.
- 2) In order to bill Medicaid for speech, hearing, and language services the individual must meet one of the following conditions:
 - a) Has obtained a CCC from the American Speech-Language-Hearing Association.
 - b) Has completed the equivalent educational requirements and work experience necessary for the CCC
 - c) Has completed the academic program and is acquiring supervised work experience to qualify for the CCC.
- 3) ASHA-CCC is a requirement for licensure in some states and for private insurance reimbursement in others. SLPs who do not complete a clinical fellowship and earn their CCCs wouldn't be able to move to other states to practice because Connecticut's lowered licensure standards are not equivalent to the 48 states that have the same requirements.
- 4) Licensure is more than just consumer protection, it is about preserving patient access. If the licensure law does not align with payer policy, patients will not have access to care.

In summary, ASHA believes it is in the best interest of the state and its consumers to license those working in their clinical fellowship/supervised professional experience period. The current procedure of collecting fees and issuing approval for the supervised professional experience lends itself easily to change without additional cost or increased work for Department staff.

ASHA would like to work with you directly to provide some model bill language and guidance to ensure that recent speech-language pathology graduates in Connecticut have the opportunity to gain the supervised experience and Medicare beneficiaries have access to their services.

If you or your staff have any questions, please contact Susan Adams, ASHA's director of state legislative and regulatory affairs, at sadams@asha.org.

Sincerely,



Elise Davis-McFarland, PhD, CCC-SLP
2018 ASHA President

¹ Bureau of Labor Statistics, U.S. Department of Labor. (2018) *Occupational Outlook Handbook, Speech-Language Pathologists*. Retrieved from <https://www.bls.gov/ooh/healthcare/speech-language-pathologists.htm>.

² Henry J Kaiser Family Foundation. (2015). *Total Number of Medicare Beneficiaries*. Retrieved from <https://www.kff.org/medicare/state-indicator/total-medicare-beneficiaries/?currentTimeframe=0&sortModel=%7B%22colld%22:%22Location%22,%22sort%22:%22asc%22%7D>.