



February 12, 2020

Superintendent Russell Toal
Office of Superintendent of Insurance (OSI)
P.O. Box 1689
Santa Fe, NM 87504-1689

RE: BlueCross BlueShield Clinical Fellow Credentialing Changes

Dear Superintendent Toal:

On behalf of the American Speech-Language-Hearing Association, I write to express concerns regarding BlueCross BlueShield of New Mexico's decision to cease credentialing clinical fellows in speech-language pathology.

The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for 204,000 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students.

Speech-language pathologists (SLPs) work in all recognized health care settings to identify, evaluate, and treat speech and language disorders, functional cognitive impairments, and swallowing disorders.

Clinical fellows (CFs) have received a graduate degree from an accredited university and operate as clinically independent practitioners. CFs are required to obtain some additional administrative supervision on a monthly basis as part of the fellowship requirement. New Mexico licenses CFs and allows them to provide treatment and evaluation services independently while under the general supervision of a fully licensed SLP as required by the CF licensure.

This letter outlines ASHA's concerns with BlueCross BlueShield of New Mexico's (BCBSNM) decision not to credential CFs including:

- employment limitations for licensed providers working within their scope of practice;
- contradicting internal provider qualification standards;
- implications for Medicare Advantage Beneficiaries; and
- network adequacy impact.

Employment Limitations for Licensed Providers Working Within Their Scope of Practice

As BCBSNM does not credential CFs within their health plan, this restricts the ability of qualified providers – operating within their scope of practice – to treat the more than 500,000 individuals enrolled in BCBS plans across the state. New Mexico's Speech-Language Pathology, Audiology and Hearing Aid Dispensing Practices Board defines a CF's scope of practice identically with the scope of practice for SLPs except for requiring administrative supervision as laid out within the regulations.

The scope of practice for CFs includes the independent evaluation and treatment of individuals with communication disorders as well as cognitive and swallowing impairments.¹

The Board defines the general supervision requirements of CFs as, “no less than thirty-six (36) occasions of monitoring. These can include on site monitoring activities such as conferences with the clinical fellow, evaluation of written reports, evaluation by professional colleagues or may be executed by correspondence.”² No licensure or scope of practice regulations exist that require supervisors to directly oversee clinical service delivery.³

New Mexico licensure statute and regulations allow CFs to independently evaluate and treat patients while receiving general supervision during their clinical fellowship. The State of New Mexico allows a CF to practice (under supervision) in the state. ASHA asserts it is not beyond the CF’s scope of practice under this regulation.

Contradicting Internal Provider Qualification Standards

BCBSNM’s internal guidelines for providers contradicts their decision not to credential CFs. Section 4 of the BCBSNM provider manual requires that professional providers meet the following three criteria:

1. Licensed
2. Certified by the Council for Affordable Quality Healthcare (CAQH)
3. Practicing under authority of New Mexico law

CFs are licensed by the New Mexico Speech-Language Pathology, Audiology and Hearing Aid Dispensing Practices Board. They can be certified by the CAQH and they operate within their established scope of practice and authority under state law.

CFs meet all the credentialing requirements in the BCBSNM provider manual and should be recognized as qualified providers by the health plan.⁴ Further, BCBSNM has provided no specific reason why they restrict credentials for qualified CFs operating within their established state scope of practice.

Implications for Medicare Advantage Beneficiaries

The Centers for Medicare & Medicaid Services (CMS) fully recognizes CFs as qualified providers and allows direct billing under the Medicare program.

Medicare recognizes state licensure as the standard for qualified providers. Medicare recognizes licensed SLPs and CFs as independent providers across inpatient and outpatient settings. In states that do not license SLPs or CFs, Medicare law explicitly recognizes the requirements for ASHA certification and explicitly recognizes CFs by extending qualified provider status to those “in the process of accumulating such supervised clinical experience”.⁵ Beyond the recognition of licensed CFs, CMS has created an exemption to explicitly recognize SLPs during their clinical fellow year as qualified providers, even in the limited states where CFs are not licensed.

As BCBSNM provides Medicare products on behalf of CMS, its denial of credentials to Medicare recognized speech-language pathology professionals could cause confusion for New Mexico Medicare beneficiaries because CMS considers CFs qualified providers and creates continuity of care challenges for BCBSNM subscribers while transitioning Medicare coverage or even for established Medicare Advantage patients.

Network Adequacy Impact

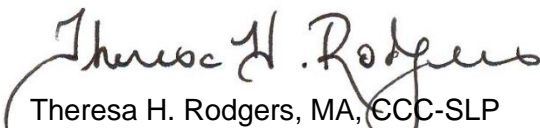
The BCBSNM decision not to credential CFs will negatively impact network adequacy. Prior to the end of 2019, CFs have been providing services to BCBSNM subscribers and this change impacts the number of enrolled providers that BCBSNM shared with the Office of the Superintendent of Insurance in regard to network adequacy requirements. In addition, according to figures compiled from the U.S. Census Bureau and ASHA's data on SLPs holding ASHA's Certificate of Clinical Competence in Speech-Language Pathology (CCC-SLP), New Mexico only has 61.9 SLPs for every 100,000 residents.^{6,7} New Mexico residents can best be served, now and in the future by BCBSNM credentialing CFs. Recognizing CFs as qualified providers will benefit New Mexico residents, SLP providers, and BCBSNM. The utilization of CFs decreases the wait time for therapy; increases the availability of speech-language pathology services across the state; and creates a pipeline for SLPs in New Mexico to meet the future needs of residents and the network adequacy of the health plan.

BCBSNM's actions will negatively impact the ability of New Mexico's consumers to obtain speech-language pathology services in a timely manner—or at all—in the future, if CFs are not allowed to practice according to their state recognized scope of practice.

ASHA strongly encourages BCBSNM to credential CFs as qualified providers within their health plan because CFs meet all qualifications for credentialing; are licensed by New Mexico; are eligible for certification by CAQH; and provide services within their scope of practice in New Mexico. BCBSNM's limitation on CF credentialing creates unnecessary treatment barriers for New Mexico residents and impedes the flow of SLPs into the state for a profession that the Bureau of Labor Statistics expects to grow much faster than average over the next decade.⁸ ASHA welcomes the opportunity to discuss resolution to this problem with BCBSNM and the Office of Superintendent of Insurance as soon as possible.

If you or your staff have any questions, please contact Michelle Cobb-King, ASHA's director of private health plan reimbursements, at mcobb-king@asha.org.

Sincerely,



Theresa H. Rodgers, MA, CCC-SLP
2020 ASHA President

¹ New Mexico Speech-Language Pathology, Audiology, and Hearing Aid Practices Board. *Speech-Language Pathology, Audiology, and Hearing Aid Dispensing Practices: Rules and Laws*. pg. 49; Section 61-14B-3.2. Retrieved from <http://www.rld.state.nm.us/uploads/files/2019%20SLPAHAD%20Rules%20Regulations%20and%20Statutes.pdf>.

² New Mexico Speech-Language Pathology, Audiology, and Hearing Aid Practices Board. *Speech-Language Pathology, Audiology, and Hearing Aid Dispensing Practices: Rules and Laws*. pg. 13; Section 16.26.2.17 B (2) a). Retrieved from <http://www.rld.state.nm.us/uploads/files/2019%20SLPAHAD%20Rules%20Regulations%20and%20Statutes.pdf>.

³ New Mexico Speech-Language Pathology, Audiology, and Hearing Aid Practices Board. *Speech-Language Pathology, Audiology, and Hearing Aid Dispensing Practices: Rules and Laws*. Retrieved from <http://www.rld.state.nm.us/uploads/files/2019%20SLPAHAD%20Rules%20Regulations%20and%20Statutes.pdf>.

⁴ BlueCross BlueShield of New Mexico. (2020). *Provider Reference Manual*. Retrieved from https://www.bcbsnm.com/pdf/provider_ref_manual/prov_man_toc.pdf.

⁵ Social Security Act, 42 U.S.C. Sec. 1395x (II)(4)(A)(ii), § 1861. Retrieved from https://www.ssa.gov/OP_Home/ssact/title18/1861.htm.

⁶ American Speech-Language-Hearing Association. (2018). *ASHA-Certified Personnel-to-Population Ratios*. Retrieved from <https://www.asha.org/Research/ASHA-Certified-Personnel-to-Population-Ratios/>.

⁷ American Speech-Language-Hearing Association. (2019). Supply and Demand Resource List for Speech-Language Pathologists. Retrieved from <https://www.asha.org/uploadedFiles/Supply-Demand-SLP.pdf>.

⁸ Bureau of Labor Statistics, U.S. Department of Labor. *Occupational Outlook Handbook, Speech-Language Pathologists*. Retrieved from <https://www.bls.gov/ooh/healthcare/speech-language-pathologists.htm>.