

August 15, 2025

The Honorable Linda McMahon
Secretary of Education
U.S. Department of Education
400 Maryland Avenue, SW
Washington, DC 20202

RE: Proposed Priority and Definitions-Secretary's Supplemental Priority and Definitions on Advancing Artificial Intelligence in Education

Dear Secretary McMahon:

On behalf of the American Speech-Language-Hearing Association (ASHA), I write to provide feedback on the U.S. Department of Education's "Proposed Priority and Definitions-Secretary's Supplemental Priority and Definitions on Advancing Artificial Intelligence in Education."¹

ASHA is the national professional, scientific, and credentialing association for 241,000 members, certificate holders, and affiliates who are audiologists; speech-language pathologists (SLPs); speech, language, and hearing scientists; audiology and speech-language pathology assistants; and students. Nearly half (49.6%) of ASHA members work in educational facilities, including early childhood, K-12, and higher education settings.² These professionals play a central role in supporting students, families, and school staff in early intervention, early childhood, and both general and special education K-12 settings. ASHA members' services are essential to helping children and students develop effective communication skills and achieve positive learning outcomes in home, community, and school settings.

This letter outlines three main areas of feedback regarding artificial intelligence (AI) most closely related to our professional scope: 1) content creation; 2) documentation and reporting burden; and 3) screening and diagnosis. ASHA recognizes AI's potential to enhance content creation, streamline documentation, and support screening and diagnosis, with the appropriate ethical safeguards, legal compliance, and professional oversight.

Creation of Materials for Audiologists and SLPs

AI has the potential to help audiologists and SLPs generate personalized, developmentally appropriate materials such as speech sound word lists, hearing technology troubleshooting checklists, and augmentative and alternative communication (AAC) supports. Tools that analyze and deepen student interests could improve engagement toward educational and functional goals in alignment with the Individuals with Disabilities Education Act (IDEA). AI could support the development of interest-driven tools for visual reinforcement audiometry or conditioned play audiometry, tailoring activities to provide person-centered care. AI-generated listening activities or environmental sound libraries could enhance hearing education and auditory training. This could include the intersection of AI with the broad continuum of assistive technology supports outlined through the Department's current guidance.

However, the use of generative AI in content creation raises serious concerns around copyright, authorship, liability, and clinical validity. Tools must also comply with IDEA's requirement for individualized, measurable goals and evidence-based interventions. **Federal investments should prioritize tools that are transparent, educator-controlled, and aligned with IDEA and professional practice guidelines.**

Documentation and Reporting

Audiologists and SLPs often face significant documentation burdens, particularly when supporting students across multiple schools. AI tools that generate SOAP (Subjective, Objective, Assessment, and Plan) notes through ambient listening have the potential to enhance workflow efficiency, improve documentation accuracy, and reduce the time spent on administrative tasks.

Despite their potential, these tools carry risks. Ambient listening technologies must comply with the Family Educational Rights and Privacy Act (FERPA) and IDEA privacy and consent requirements. Improper use could expose schools to liability and compromise student confidentiality. **Audiologists and SLPs must retain full clinical judgment for documentation accuracy and should be involved in any procurement, design, and review of output process for AI documentation tools.** As with any tool, the licensed provider should have ultimate decision-making authority over the application of AI in audiology and speech-language pathology services. Keeping a human in the loop of any AI workflow is essential to ensure safety, compliance, and best practice.

Screening and Diagnosis

AI technologies are increasingly showing promise in their ability to assist SLPs in analyzing speech patterns, detecting neurological or developmental concerns, and supporting mental health screenings. These tools may eventually support early identification and detailed characterization of speech sound delays and disorders, stuttering, language disorders, or voice disorders. AI-powered tools could also aid in collecting language samples and monitoring student progress, allowing clinicians to track improvements over time and adjust interventions more precisely.

However, there are risks to consider. Some AI models are trained on nondiverse datasets, which may misinterpret speech, language, or hearing differences in multilingual learners, those speaking different dialects, or students with disabilities. Without transparency, clinicians cannot evaluate how decisions are made. If a student is misdiagnosed by an opaque tool, liability could fall on the school district or provider.

Audiologists and SLPs must lead the integration of these tools, ensuring they are used to enhance—not replace—professional judgment. Moreover, any AI-assisted screening must be validated against IDEA's requirements for nondiscriminatory evaluation practices.

To ensure AI supports the delivery of high-quality school-based audiology and speech-language services, we urge the Department to:

- 1) Fund research and pilot programs that assess the effectiveness, bias, and legal implications of AI tools used by school-based audiologists and SLPs;

- 2) Develop federal guidelines for the ethical and compliant use of AI in special education and related services, including documentation, diagnosis, and therapy;
- 3) Ensure professional training and decision-making authority for audiologists and SLPs regarding AI adoption in their practice areas; and
- 4) Convene multi-disciplinary working groups that include clinicians, developers, disability advocates, and students with experience to co-create appropriate and inclusive AI tools.

Thank you for your leadership in exploring the future of AI in education. **We urge the Department to fully include audiologists and SLPs in future guidance, funding opportunities, and evaluation criteria.** Audiologists and SLPs are highly utilized in federally supported programs ranging from IDEA Part B, C, and D to school-based Medicaid and vocational rehabilitation. For example, according to the Department's *45th Annual Report to Congress on the Implementation of the Individuals with Disabilities Education Act, 2023*, speech or language impairments account for the second-largest percentage (34%) of primary eligibility disabilities in children ages 3 to 5 receiving early childhood services under IDEA Part B.³

Thank you for the opportunity to provide feedback. If you or your staff have any questions, please contact Bill Knudsen, ASHA's director of education policy, at bknudsen@asha.org.

Sincerely,



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2025 ASHA President

¹ Federal Register. (2025). *Proposed Priority and Definitions-Secretary's Supplemental Priority and Definitions on Advancing Artificial Intelligence in Education*. <https://www.federalregister.gov/documents/2025/07/21/2025-13650/proposed-priority-and-definitions-secretarys-supplemental-priority-and-definitions-on-advancing>

² American Speech-Language-Hearing Association. (2025). *2024 Member & Affiliate Profile*. <https://www.asha.org/siteassets/surveys/2024-member-affiliate-profile.pdf>

³ U.S. Department of Education, Office of Special Education and Rehabilitative Services, Office of Special Education Programs. (March 2024). *45th Annual Report to Congress on the Implementation of the Individuals with Disabilities Education Act, 2023*. <https://sites.ed.gov/idea/files/45th-arc-for-idea.pdf>