



May 8, 2023

The Honorable Charles Schumer  
Majority Leader  
U.S. Senate  
Washington, DC 20510

The Honorable Mitch McConnell  
Minority Leader  
U.S. Senate  
Washington, DC 20510

The Honorable Kevin McCarthy  
Speaker  
U.S. House of Representatives  
Washington, DC 20515

The Honorable Hakeem Jeffries  
Minority Leader  
U.S. House of Representatives  
Washington, DC 20515

Dear Speaker McCarthy, Majority Leader Schumer, Leader McConnell, and Leader Jeffries:

On behalf of the American Speech-Language-Hearing Association (ASHA), I write to express concerns regarding H.R. 2811, the Limit, Save, Grow Act of 2023.

ASHA is the national professional, scientific, and credentialing association for 228,000 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students. Audiologists specialize in preventing and assessing hearing and balance disorders as well as providing audiologic treatment, including hearing aids. Speech-language pathologists (SLPs) identify, assess, and treat speech, language, swallowing, and cognitive communication disorders.

ASHA has the following concerns about the bill's impact on the ability of patients to access critical services our members provide, the education of students with disabilities, and the future audiology and speech-language pathology workforce:

### **Discretionary Health Spending Cuts**

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H.R. 2811 would revert 2024 discretionary funding to 2022 levels and impose a 1% annual growth cap on non-defense discretionary appropriations, resulting in cuts to a wide range of programs and services. This would jeopardize critical funding for the National Institute on Deafness and Other Communications Disorders (NIDCD) at the National Institutes of Health (NIH), and the National Institute on Disabilities, Independent Living and Rehabilitation Research (NIDILRR) at the Administration for Community Living (ACL).

NIDCD investments are needed to ensure research on communication sciences continues to evolve and expand. Approximately 46 million Americans have a communication disorder.<sup>1</sup> These disorders impact the economy through costs related to lost productivity, special education services, rehabilitation needs, health care expenditures, and lost revenue. NIDILRR funding supports a wide range of applied research into new areas of emerging science to support individuals with disabilities.

The proposed legislation would also jeopardize funding for the Early Hearing Detection and Intervention (EHDI) Act programs, which offer early hearing screening and intervention to all newborns, infants, and young children in every state and territory. Cuts to EHDI programs may leave thousands of children with undiagnosed hearing loss and deprive children who are deaf or

hard of hearing from receiving follow-up services that improve language skills and development. The cuts would prevent Congress from funding these programs at the levels authorized last year by the Early Hearing Detection and Intervention Act (Public Law 117-241), which passed the Senate by voice vote and the House by a vote of 408 to 17.

### **Medicaid Work Requirements**

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The proposed legislation would reduce spending in the Medicaid program by requiring adults between the ages of 19 and 56, with limited exceptions, to fulfill “community engagement requirements” such as work, community service, or a work training program to remain eligible for coverage.

ASHA has consistently opposed efforts on both the state and federal level to impose work requirements as a condition of Medicaid eligibility. Work requirements would create unnecessary barriers and reduce access to medically necessary care for low-income citizens and individuals with disabilities. Additionally, the majority of Medicaid enrollees already work or have significant reasons that they cannot (e.g., caregiving duties, illness or disability, school attendance).<sup>2</sup> We urge you to exclude Medicaid cuts or changes that limit funding or eligibility from any debt ceiling and budget negotiations as well as any legislation.

Many factors, including poverty, impact a person’s health and well-being. Poverty also disproportionately affects women and children.<sup>3</sup> Medicaid provides health care support to low-income individuals and people with disabilities. Onerous work requirements undermine the goals of the Medicaid program. Medicaid work requirements do not increase long-term employment, nor do they reduce poverty.<sup>4</sup>

Enforcing and monitoring work requirements increases program administrative costs, which undermine savings that only result from reduced enrollment and spending on actual medically necessary health care services.<sup>5</sup> Furthermore, uncompensated care costs would increase as a result of coverage losses, adding to the burden on states and health care providers.

According to estimates from the Center on Budget and Policy Priorities, over 10 million Medicaid expansion enrollees would be at risk of losing Medicaid coverage under the Limit, Save, Grow Act of 2023. These estimates utilized 2019 data, which does not include the nine states that expanded Medicaid coverage in 2020 and beyond, and, therefore, likely understates the number of Medicaid enrollees who are at risk.<sup>6</sup>

It remains clear that adding work requirements to Medicaid would cause many low-income adults to lose coverage due to bureaucratic hurdles and would leave many without the health care they need, including the critical services provided by audiologists and SLPs.

### **Cuts to the Individuals with Disabilities Education Act**

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Under H.R. 2811, the Individuals with Disabilities Education Act (IDEA) state grants would decline by \$3.1 billion, impacting 7.5 million students with disabilities, according to the National Education Association. This would cut the equivalent of 48,000 educators including educational audiologists and school-based SLPs.

Speech-language pathology services are highly utilized by students served under IDEA. According to the U.S. Department of Education’s 43rd Annual Report to Congress on the Implementation of IDEA, 2021, speech or language impairments represent the most prevalent

disability category of services provided under IDEA Part B: 39.9% of children ages 3 through 5, and 16.3% of students ages 6 through 21.<sup>7</sup>

Congress has never met the goal of funding 40% of the average per-pupil expenditure for students with disabilities in public elementary and secondary schools.<sup>8</sup> The significant cut to IDEA funding—as proposed by H.R. 2811—would increase the burden of ensuring that children with disabilities receive the free appropriate public education (FAPE) even further to state and local education agencies.

This legislation would also increase the risk that students would not receive the FAPE, to which they are legally entitled, and reduce the ability of all students to receive the services they need to succeed academically. The additional funding that states would have to provide to fill the hole, if H.R. 2811 is enacted, would leave less money to recruit and retain educational audiologists and school-based SLPs, keep salaries competitive, and hire additional staff.

### **Student Loan Programs and Debt Forgiveness**

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H.R. 2811 would result in a cut of \$468 million in federal support to determine, disburse, and service student aid. This funding reduction would negatively impact the ability of the U.S. Department of Education to serve students and their families in accessing federal student loans and services. Particularly with student loan payments resuming later this year after the pause for the COVID-19 pandemic, reduced federal student loan services for borrowers will exacerbate any potential challenges that borrowers experience when resuming payments.

H.R. 2811 would not only prohibit the Administration's proposed forgiveness of up to \$20,000 in federal student loans, but it would also significantly hamper the ability of the Secretary of Education to propose new rules that take action to protect borrowers, and block proposed changes to loan repayment plans that are designed to help borrowers achieve economic success.

In order to attain a license to practice and become ASHA certified, audiologists must earn a clinical doctorate degree and speech-language pathologists (SLPs) must earn a master's degree. Ensuring that borrowers have access to repayment programs—such as those that are income-driven—helps the recruitment and retention of audiologists and SLPs to provide services in a wide range of settings including public schools, nonprofit hospitals, and community early childhood programs.

Thank you for considering ASHA's concerns regarding the Limit, Save, Grow Act of 2023. If you or your staff have any questions, please contact Josh Krantz, ASHA's director of federal affairs, health care, at [jkrantz@asha.org](mailto:jkrantz@asha.org).

Sincerely,



Robert M. Augustine, PhD, CCC-SLP  
2023 ASHA President

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<sup>1</sup> National Institute on Deafness and Other Communication Disorders (NIDCD). (2019). Mission. <https://www.nidcd.nih.gov/about/mission>.

<sup>2</sup> Guth, M., Drake, P., Rudowitz, R., Mohamed, M. (Apr 24, 2023) Understanding the Intersection of Medicaid & Work: A Look at What the Data Say. <https://www.kff.org/medicaid/issue-brief/understanding-the-intersection-of-medicaid-work-a-look-at-what-the-data-say/>.

<sup>3</sup> Annals of Medical & Health Sciences Research. (2017). The Negative Impact of Poverty on the Health of Women and Children. <https://www.amhsr.org/articles/the-negative-impact-of-poverty-on-the-health-of-women-and-children-4022.html>.

<sup>4</sup> Urban Institute. (2021). Work Requirements Sound Good, but the Evidence Just Doesn't Support Them. <https://www.urban.org/urban-wire/work-requirements-sound-good-evidence-just-doesnt-support-the>

<sup>5</sup> Wagner, J., Solomon, J. (2018). States' Complex Medicaid Waivers Will Create Costly Bureaucracy and Harm Eligible Beneficiaries. <https://www.cbpp.org/research/health/states-complex-medicaid-waivers-will-create-costly-bureaucracy-and-harm-eligible>.

<sup>6</sup> Lukens, G. (Apr. 21, 2023). McCarthy Medicaid Proposal Puts Millions of People in Expansion States at Risk of Losing Health Coverage. Center on Budget and Policy Priorities. <https://www.cbpp.org/research/health/mccarthy-medicaid-proposal-puts-millions-of-people-in-expansion-states-at-risk-of>.

<sup>7</sup> U.S. Department of Education, Office of Special Education and Rehabilitative Services, Office of Special Education Programs, *43rd Annual Report to Congress on the Implementation of the Individuals with Disabilities Education Act, 2021*, Washington, D.C. 2022. <https://sites.ed.gov/idea/files/43rd-arc-for-idea.pdf>.

<sup>8</sup> Kolbe, T., Dhuey, E., Menlove Dautre, S. (Oct. 3, 2022). More money is not enough: The case for reconsidering federal special education funding formulas. Brookings. <https://www.brookings.edu/blog/brown-center-chalkboard/2022/10/03/more-money-is-not-enough-the-case-for-reconsidering-federal-special-education-funding-formulas/>.