



**American Speech-Language-Hearing Association**

**Testimony for the Record**

**Subcommittee on Labor, Health and Human Services, Education and Related Agencies**

**Committee on Appropriations**

**United States House of Representatives**

**May 26, 2022**

Chair DeLauro and Ranking Member Cole: The American Speech-Language-Hearing Association (ASHA) thanks you for the opportunity to submit testimony on the Fiscal Year (FY) 2023 Labor, Health and Human Services, Education and Related Agencies appropriations bill. My name is Judy Rich, EdD, CCC-SLP, BCS-CL, ASHA's President for 2022.

As the Subcommittee begins its work on this critical legislation, I offer ASHA's support for the following programmatic funding requests for the U.S. Department of Health & Human Services:

1. \$16,000,000 for the Centers for Disease Control and Prevention (CDC) and \$19,522,758 for the Health Resources and Services Administration (HRSA) for the Early Hearing Detection and Intervention programs within the Department of Health and Human Services.
2. \$514,885,000 for the National Institute on Deafness and Other Communication Disorders (NIDCD) at the National Institutes of Health (NIH), while ensuring that NIDCD receives an equitable funding share from any increases to NIH funding in FY 2023.
3. \$126,470,000 for the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR) at the Administration for Community Living (ACL) within the Department of Health and Human Services.

Additionally, ASHA supports the following programmatic funding requests for the U.S.

Department of Education (ED):

1. \$16.76 billion for the Individuals with Disabilities Education Act (IDEA) Part B State Grants, \$503 million for IDEA Part B Section 619 Preschool Grants, \$932 million for IDEA Part C Infants and Toddlers with Disabilities, and \$250 million for IDEA Part D section 662 personnel preparation grants within ED.
2. \$1 billion for the Administration's proposed School-Based Health Professionals program to support efforts to address shortages of school-based health professionals. ASHA also urges the Subcommittee to ensure that speech-language pathologists (SLPs) and audiologists are eligible for this program.

In addition, ASHA encourages the Subcommittee to include report language to establish issue-specific technical assistance (TA) centers within ED to improve the ability of school-based SLPs and educational audiologists to meet the needs of students with communication disorders.

Specifically, ASHA urges the Subcommittee to create TA centers focused on

Communications/Speech Disorders; Medicaid Services and Reimbursement; Workload Mitigation; and Telepractice Services.

### **Early Hearing Detection and Intervention Act**

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The Early Hearing Detection and Intervention (EHDI) Act is one of the nation's most important public health programs, offering early hearing screening and intervention to all newborns, infants, and young children in every state and territory. Since Congress first authorized EHDI in 2000, it has been instrumental in increasing newborn hearing screening rates from 46% to 98% in 2019. Funding EHDI at sufficient levels is critical to ensure all newborns are screened for hearing loss and receive follow-up services. **Underfunding EHDI may leave thousands of children with undiagnosed hearing loss and deprive children who are deaf or hard of hearing from**

**receiving critical follow-up services.** Children facing disparities related to socioeconomic factors, geography, medical infrastructure, and social support contribute to delays in diagnosis and treatment of hearing loss. These disparities impact racial and ethnic minorities at a higher rate. With more resources, EHDI programs can better ensure access to services among racial and ethnic minority populations.

Past EHDI legislation has expanded the program's scope, while resources have stagnated. Additional program objectives passed into law by Congress, including continued follow-up beyond 6-months of age, and comprehensive supports for families of children who are deaf or hard of hearing, remain a challenge for under resourced EHDI programs.

**ASHA urges the Subcommittee to provide identified levels of funding for the Early Hearing Detection and Intervention Act to ensure that all children with hearing loss receive timely screening, diagnosis, and intervention services.**

**National Institute on Deafness and Other Communication Disorders, and the National Institute on Disabilities, Independent Living and Rehabilitation Research**

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ASHA applauds the Subcommittee's continued efforts to increase funding for health care research. ASHA strongly supports continued increases in funding for the National Institute on Deafness and Other Communication 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). **ASHA urges the Subcommittee to provide identified levels of funding for NIDCD and NIDILRR to ensure this research continues and evolves to address the needs of individuals with communication disorders.**

## **Individuals with Disabilities Education Act**

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A substantial increase in funding for IDEA is a step toward fulfilling the promise that Congress made to fund 40% of the average per-pupil expenditure in public elementary and secondary schools. This critical program serves more than 6.5 million children in our nation's schools, including students with communication disorders.<sup>i</sup> Schools and districts continue to grapple with costs associated with the Coronavirus Disease 2019 (COVID-19) pandemic and require additional resources to address challenges associated with ensuring continued education and delivering necessary services and supports for children with disabilities.

**ASHA supports the Administration's FY 2023 budget request for IDEA at the levels identified above to ensure students with disabilities can continue to access the services that they are legally entitled to.**

## **Technical Assistance Centers**

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Speech-language pathology services are highly utilized by students served under IDEA. According to ED'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>ii</sup> ASHA's 2020 Schools Survey found that school-based SLPs and educational audiologists identified excessive paperwork, high workload/caseload, and Medicaid reimbursement as critical challenges.<sup>iii,iv</sup>

Establishing TA centers focused on key issues impacting school-based SLPs and educational audiologists would provide them valuable support; thereby, helping to ensure FAPE for students

they serve. ASHA encourages the Subcommittee to include report language to establish four issue-specific TA centers within ED:

1. **Communications/Speech Disorders Center:** Provide resources, guidance, and best practices pertaining to communication disorders for clinicians and other members of the school community, and support capacity development to ensure access to such services.
2. **Medicaid Services and Reimbursement Center:** Provide resources to ensure that students who qualify for services under Medicaid receive such services, and to streamline the reimbursement process for providers, schools, and local and state education agencies.
3. **Workload Mitigation Center:** Provide resources to mitigate the workload burden for SLPs, audiologists, and other personnel to best serve students, and support state and local education agency (SEA and LEA) capacity building of providers.
4. **Telepractice Services Center:** Provide resources to support telepractice and the application of telecommunications technology to the delivery of services at a distance, and build capacity among SEAs and LEAs to appropriately access and provide services.

## Conclusion

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Thank you for the opportunity to provide this testimony for the record. ASHA appreciates the Subcommittee's past investments in these important health and education programs and urges continued support at the recommended funding levels.

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<sup>i</sup> U.S. Department of Education. (n.d.). *About IDEA*. <https://sites.ed.gov/idea/about-idea/>.

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

<sup>iii</sup> American Speech-Language-Hearing Association. (2020). 2020 Schools survey. *Survey summary report: Numbers and types of responses, SLPs*. [www.asha.org](http://www.asha.org).

<sup>iv</sup> American Speech-Language-Hearing Association. (2020). 2020 Schools survey. *Survey summary report: Numbers and types of responses, educational audiologists*. [www.asha.org](http://www.asha.org).