



September 16, 2020

Ms. Brean Arnold  
Rules Coordinator  
Oregon Health Authority  
Health Systems Division  
500 Summer St., NE  
Salem, OR 97301

RE: ASHA Support for Proposed Telehealth Regulations

Dear Ms. Arnold:

On behalf of the American Speech-Language-Hearing Association, I write in support of the proposed rules making the use of telehealth technologies for school-based health services for children permanent.

The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for more than 211,000 members and affiliates who are audiologists; SLPs; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students. Over 2,250 ASHA members reside in Oregon.<sup>1</sup>

As the leading national organization for the certification and advancement of audiologists and speech-language pathologists (SLPs), ASHA supports the development and use of telehealth, telemedicine, and telepractice. ASHA maintains a collection of professional practice documents, including a position statement that defines telehealth as “the application of telecommunications technology to deliver professional services at a distance by linking clinician to client, or clinician to clinician for assessment, intervention, and/or consultation.” ASHA maintains that telehealth, telemedicine, and telepractice are interchangeable terms. These documents include a technical report and service delivery guidelines that may be accessed on ASHA’s website.<sup>2</sup>

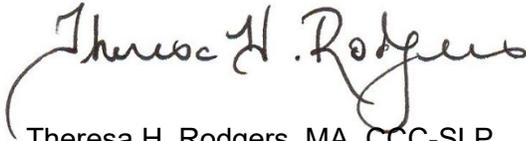
ASHA strongly supports the use of and reimbursement for telehealth. Research demonstrates the equivalence of telehealth to in-person service delivery for a wide range of diagnostic and treatment procedures for adults and children.<sup>3</sup> Studies have shown high levels of patient, clinician, and parent satisfaction supporting telemedicine as an effective alternative to the in-person model for delivery of care.<sup>4</sup> Telehealth expands practitioners’ availability to those in need—regardless of geographic location—saving time and resources for both the provider and the patient.

Despite proven benefits, telehealth remains underutilized within both audiology and speech-pathology due to a lack of clear state laws governing its use or mandating appropriate reimbursement for services delivered. ASHA appreciates that the regulations include the use of:

- synchronous audio and visual interactive technologies;
- telehealth audio-only interactive audio/telephonic services provided to a child/student in a geographical area where synchronous audio and video is not available or consent for audio/video is refused for services provided to a child/student; and
- electronic or telephonic communications such as telephone conversation, video conference, or an internet relay chat session for care coordination.

Thank you for your consideration of ASHA's position to the proposed telehealth regulations, which will benefit all children in Oregon during the COVID-19 public health emergency and beyond. If you or your staff have any questions, please contact Eileen Crowe, ASHA's director, state association relations, at [ecrowe@asha.org](mailto:ecrowe@asha.org).

Sincerely,

A handwritten signature in black ink that reads "Theresa H. Rodgers". The signature is written in a cursive style with a large, looping initial "T".

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

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<sup>1</sup> American Speech-Language-Hearing Association. (2020) *Oregon* [Quick Facts].  
<https://www.asha.org/uploadedFiles/Oregon-State-Flyer.pdf>

<sup>2</sup> The American Speech-Language-Hearing Association. (n.d.) *Practice Portal: Telepractice*.  
<http://www.asha.org/Practice-Portal/Professional-Issues/Telepractice/>.

<sup>3</sup> Grogan-Johnson, S., Alvares, R., Rowan, L., & Creaghead, N. (2010). A pilot study comparing the effectiveness of speech language therapy provided by telemedicine with conventional on-site therapy. *Journal of Telemedicine and Telecare*, 16, 134–139.

<sup>4</sup> Ibid.