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Public Health Committee  
Connecticut Legislature  
Hartford, CT

Re: PH testimony H. B. No. 6265

To the Members of the Public Health Committee:

As President-Elect of the Connecticut Speech, Language and Hearing Association, Director of the Yale Child Study Center's Laboratory of Developmental Communication Disorders, and author of a textbook on Speech-Language Pathology that deals with the topics of diagnosis and evaluation, I wish to provide expert testimony regarding H. B. No. 6265. This bill would change the language of licensure for Speech-Language Pathologist as follows:

The practice of speech and language pathology" means the application of principles, methods and procedures for the measurement, testing, [diagnosis] evaluation, prediction, counseling or instruction relating to the development and disorders of speech, voice or language or feeding and swallowing or other upper aerodigestive functions for the purpose of [diagnosing] evaluating, preventing, treating, ameliorating or modifying such disorders and conditions in individuals, or groups of individuals.

with the bracketed terms being replaced by those underlined. This proposed bill is ill-considered for the following reasons:

1. The terms *diagnosis* and *evaluation* are not synonymous. *Diagnosis* refers to the assignment of a disease category label that entails eligibility for services and/or insurance coverage. *Assessment/evaluation* refers to the detailed description of the character of the individual's disability.
2. The scope of practice for Speech-Language Pathologists, as determined by our national accreditation body, the American Speech, Language, Hearing Association (ASHA) includes both *diagnosis* and *assessment/evaluation*.
3. Speech-Language Pathologists use ICD codes for reimbursement. Therefore, they are required to determine and assign speech and/or language diagnoses through coding.
4. Coding can includes a "primary" or medical diagnosis, such as *stroke*, which identifies the underlying medical cause of a condition. The Speech-Language Pathologist determines the nature of the communication diagnosis that is put on the claim. Physicians do not have the

training in speech-language pathology to conduct speech/language assessment, which determines a diagnosis of the specificity necessary to determine treatment, such as distinguishing aphasia from dysarthria, or dysarthria from apraxia. Without a specific diagnosis, insurance reviewers would not be able to review a chart and determine whether the treatment was appropriate.

5. Under Section 300.34 (15) of Federal IDEA regulations, speech-language pathology includes:
  - identification of children with speech and/or language impairments;
  - appraisal and *diagnosis* of specific speech and/or language impairments;
  - referral for medical or other professional attention necessary for the habilitation of children with speech or language impairments...

Since the term *diagnosis* is used in this context of evaluation, CT law should be consistent with Federal law, as expressed in IDEA.

In summary, Speech-Language Pathologists provide diagnosis of speech/language disorders as evidenced by their accepted use of ICD-9 diagnosis codes. If Speech-Language Pathologists did not provide these diagnoses, the accuracy and timeliness of processing insurance claims would be severely affected. In addition, both ASHA and IDEA support the role of Speech-Language Pathologists in providing diagnoses of communication disorders.

I urge you to reject this change in the language of licensure for Speech-Language Pathologists in Connecticut, to avoid disruptions in the vital services we provide.

For further guidance on these issues, you may wish to consult:

American Speech-Language-Hearing Association. (2004). Roles of speech-language pathologists in the identification, diagnosis, and treatment of individuals with cognitive-communication disorders: Position statement. <http://www.asha.org/docs/html/PS2005-00110.html>

This position statement defines the roles of speech-language pathologists in the evaluation and management of individuals with communication disorders associated with cognitive impairments and clarifies the scope and rationale for these services.

American Speech-Language-Hearing Association. (2004). Preferred Practice Patterns for the Profession of Speech-Language Pathology [Preferred Practice Patterns]. <http://www.asha.org/docs/html/PP2004-00191.html>.

Practice Pattern #10 states that comprehensive speech-language assessments are conducted by appropriately credentialed and trained speech-language pathologists. Speech-language pathologists may perform these assessments individually or as members of collaborative teams that may include the individual, family/caregivers, and other relevant persons (e.g., educators and medical personnel). The document goes on to state that assessment includes diagnosis of a speech, language, cognitive-communication and/or swallowing disorder.

Sincerely,



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