February 10, 2015

Senator Randi Becker
Chair, Senate Committee on Health Care
110 Irv Newhouse Building
P.O. Box 40402
Olympia, WA 98504

RE:   S.B. 5175

Dear Chairperson Becker and members of the Senate Committee on Health Care:

On behalf of our members, I am writing in support of S.B. 5175, which further defines telemedicine and continues to include speech-language pathologists and audiologists as health care providers. The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for more than 173,000 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students. Over 2,900 of our members reside in Washington.

Support for Telemedicine/Telepractice
As the leading national organization for the certification and advancement of audiologists and speech-language pathologists, we support the development and use of telemedicine or “telepractice.” ASHA has a family of professional practice documents, approved by ASHA’s Board of Directors in 2004, including a position statement that defines telepractice 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.”

These documents include a technical report and service delivery guidelines that can be accessed on ASHA’s website at [http://www.asha.org/Practice-Portal/Professional-Issues/Telepractice/](http://www.asha.org/Practice-Portal/Professional-Issues/Telepractice/).

Effectiveness of Telemedicine/Telepractice
Research has demonstrated the equivalence of telepractice to in-person service delivery for a wide range of diagnostic and treatment procedures for adults and children. Studies have shown high levels of patient, clinician, and parent satisfaction. Thus, telepractice has been shown to be an effective alternative to the in-person model for delivery of care. It permits specialists to be available to those in need—regardless of geographic location—and saves time and money for both the provider and the client. As such, it has the benefit of availing services to those individuals who might not have access otherwise.

Thank you for the opportunity to provide comments. We hope that we can count on your continued support of this important legislation. Should you have any questions, please contact Eileen Crowe, ASHA’s director, state association relations, at ecrowe@asha.org; or Janet Deppe, ASHA’s director of state advocacy, at jdeppe@asha.org.

Sincerely,

[Signature]

Judith L. Page