

Policy and Legislation

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| Reference # | 11860908 |
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Comment(s) or question(s)

I am writing to request permanent funding for speech language therapy services through telepractice.

Our clients are complex and use speech generating devices to communicate, when not seen, they lose critical skills that are necessary to maintain their health, safety and well-being.

The telepractice platform has proven to be an extremely successful vehicle to continue to provide these much needed services in the safest and most efficient manner.

Should telepractice coverage not be extended and services returned to the clinic setting, clients will be forced to decide whether to stop services and risk the loss of skills as many have difficulty getting to a clinic.

I have a caseload of 100% speech generating device users. My clients range from school age children to older adults. I have continued to see clients during the pandemic through telepractice. This type of intervention has been critical to both maintaining necessary communication skills for both mental and physical health as well as increasing skills to improve communication effectiveness across partners.

I have been successful with obtaining new speech generating devices for many of my clients. Best practices were used for evaluation and determination of new equipment and communication program needs. I was able to do extensive device trials, sending equipment to client's homes and then setting up zoom sessions with all caregivers, clients, reps and other supports to make sure we are addressing all areas.

This was difficult to coordinate in person sessions. But through telepractice, more key supports could contribute and be educated on options that would meet the needs of each...

... client.

Additionally, if a client's device was not operating correctly, through remote programming and assessment, I was always successful with repair or modifications to enable continue use of their current system. This type of treatment was even more effective through telepractice as I was able to see what was happening in each client's home. Many of my clients have severe medical conditions that limit their ability to travel or maintain their position in a wheelchair. Many clients have procedures done that require them to stay in their beds for long periods of time. During this time, they often have never had opportunities to continue their specialized speech generating device training and customizations. Through telepractice, I was able to continue the medically necessary care and work with them in their rooms, where they could be in relaxed position, enabling improved device access.

Many individuals I see for both therapy and evaluation live with caregivers. Often these caregivers do not know how to communicate with them. During in clinic visits, it was often hard to train caregivers as they were unable to come to sessions. During telepractice sessions, there are often multiple caregivers in the home. I can train more people on supporting device use and maintaining device operation. This is critical to generalization of skill in their home and when they can go out in the community.

I have been able to teach clients the necessary skills and set up on their communication devices to contact their doctor's office through telepractice. I was able to be a part of their session in a virtual meeting and have access to their device remotely to support their communication with their...

... care providers. This was unable to be done at in clinic sessions.

I was able to provide treatment to individuals who live too far away to drive to our specialized clinic. Prior to the pandemic, these individuals were unable to be seen. Other clients would drive 2 hours to see me for therapy. The impact of driving in a van for a long period of time was stressful. The individual would have more difficulty with staying upright in their wheelchair and consequently making it hard to use their access method such as eye gaze or switch scanning.

During telehealth, I was able to see the same individual without the duress of the drive. Significant improvement was observed, and they increased their persistence with communication.

I have done complete speech generating device evaluations during the pandemic. Each evaluation has resulted in the most appropriate equipment determination and successful set up through remote training and programming. I have easily been able to get representatives from the device company involved with the remote training. Scheduling is much easier to coordinate multiple people when driving is taken out of the equation. The process of assessment has also been faster through telepractice. I have successfully been able to communicate with physicians, funding sources, representatives and families to get the necessary paperwork completed and submitted.

During in clinic sessions, we would often have cancelations for therapy due to transportation problems, health issues of either client or supports, or caregiver unavailability. During telepractice, my cancelation rate is minimal. This translates into better treatment and a dramatic reduction in loss of...

... the necessary skills to communicate about issues impacting safety, mental and physical health, and daily living.

Private insurance, managed Medicaid programs in Washington state and Medicare have been primary funding sources for procurement of new durable medical equipment and the necessary therapy services to train, set up and customize speech generating devices.

It is crucial to enact legislation to fund speech language therapy services involving language evaluation and intervention and speech generating device evaluation and treatment as a permanent option for the most vulnerable individuals who depend on alternative and augmentative communication.

Please feel free to contact me for more information.

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