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Telepractice Delivers Speech/Language Services

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What is telepractice?



Telepractice is delivering speech/language therapy using technology when the service provider (speech-language pathologist) is in a different location than the client. Other names for telepractice include telespeech, teleaudiology, speech teletherapy, or telerehabilitation. Clinicians report using telepractice to address multiple speech and language disorders, including articulation disorders, autism, dysarthria, language disorders, cognitive disorders, dysphagia, and voice disorders (American Speech Language-Hearing Association, 2010).

What are the benefits of using telepractice?



In many areas, there is a shortage of speech-language pathologists (SLPs) to provide services both in school systems and medical facilities. Telepractice “offers the potential to deliver services in underserved and remote/rural geographic areas where they are not available and in areas with shortages of specialists” (Mashima & Doarn, 2008, p. 1106). Mashima and Doarn also found

that telepractice can increase the efficiency and cost effectiveness of treatment while providing homebound patients with appropriate therapy (2008, p. 1106).

Clinicians report several benefits of using telepractice. Geurin and Marion-Wilson report that students made adequate progress on IEP goals and objectives when using telepractice. Additionally, they report that adolescents find the technology motivating and frequently prefer telepractice to more traditional speech therapy services (2013).

How does telepractice work?



Telepractice speech/language services utilize a variety of technology. Smartphones, tablets, desktop computers, laptop computers, and business class video conferencing tools connect speech-language pathologists and clients (Guerin S., Marion-Wilson., T., 2013).

Telepractice speech therapy sessions fall into two categories: synchronous or asynchronous. Synchronous telepractice occurs in real-time and closely resembles video chat; the SLP and client interact to share audio, video, data, and images. In an asynchronous telepractice, SLPs and clients record and store audio, video, data and/or images, and then forward the stored data for viewing without any real-time interaction (American Speech-Language Hearing Association, 2010).

Will patients receive the same quality of service?



Regardless of the service delivery model (telepractice or face-to-face), SLPs must comply with the American Speech-Language Hearing Association’s (ASHA) standards, code of ethics, roles, responsibilities, and preferred practice patterns (American Speech-Language Hearing Association, 2010).



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Where do telepractice services occur?



Anywhere! Telepractice takes place in schools, medical centers, child-care centers, outpatient clinics, and corporate settings. In many cases, a trained facilitator must be present with the client during therapy sessions (American Speech-Language Hearing Association, 2010).

Who is a good candidate for telepractice?



Telepractice is not appropriate for all situations. Clinicians must carefully consider a client's physical and sensory characteristics, cognitive functioning, behavior, communication skills, and level of support prior to initiation services ("Telepractice," n.d.).

What about licensure?



Each state governs its regulations of telepractice. ASHA advises that telepractitioners must be licensed in their home state and in the states in which their clients/patients reside. "Clinicians should verify licensure requirements and policies regarding telepractice, both in the states where they are licensed and where they wish to telepractice, prior to initiating services" ("Telepractice," n.d.). SLPs should closely review state laws and policy, as not all states allow speech-language pathologists to provide services via telepractice.

How do clinicians receive reimbursement?



Reimbursement varies by agency and state, so clinicians should verify individual policies prior to beginning telepractice. Currently, SLPs may not bill Medicare for telepractice. Because Medicaid varies from state to state, clinicians should verify reimbursement with the respective state's Medicaid office ("Telepractice," n.d.).

Is telepractice private and secure?



Clinicians providing telepractice services must adhere to the same regulations as those who are providing face-to-face services. Providers must comply with HIPAA (Health Insurance Portability and Accountability Act) regulations when choosing technology to use for telepractice, and take steps to ensure that the privacy of a client's protected health information remains secure (American Speech-Language Hearing Association, 2010).

Resources:

- <http://www.asha.org/Advocacy/state/State-Telepractice-Requirements/>
- <http://www.asha.org/Practice-Portal/Professional-Issues/Telepractice/Telepractice-Frequently-Asked-Questions/>
- <http://blog.asha.org/2012/03/01/telehealth-regulatory-and-legal-considerations-frequently-asked-questions/>
- <http://www.asha.org/Practice-Portal/Professional-Issues/Telepractice/>

References:

- American Speech-Language Hearing Association. (2010). Professional Issues in Telepractice for Speech-Language Pathologists [Professional Issues Statement]. Available from www.asha.org/policy
- Geurin, S., & Marion-Wilson, T. (2013). Reaching Adolescents through Telepractice. Presented at Annual Conference for the American Speech, Language, and Hearing Association, Chicago.
- Mashima, P., & Doarn, C. (2008). Overview of telehealth activities in speech-language pathology. *Telemedicine and e-Health*, 14(10), 1101-1117.
- Telepractice. (n.d.). Retrieved June 13, 2014, from American Speech-Language Hearing Association website: <http://www.asha.org/Practice-Portal/Professional-Issues/Telepractice/>

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