

Submitter: Frankie Dow
On Behalf Of:
Committee: House Committee On Behavioral Health and Health Care
Measure, Appointment or Topic: HB2357

February 19, 2025

Chair Nosse

900 Court St. NE, S-411

Salem, OR 97301

RE: HB 2357 Relating to OT, Speech Language Pathology, Audiology Compact Bill

Position: Support

Dear Chair Nosse, Vice Chair Javadi, Vice Chair Nelson, and members of the committee,

I am writing to you as a licensed speech language pathologist and an Oregonian to ask you to support HB 2357. This vital legislation will allow Speech Language Pathologists and Audiologists to better serve all Oregon populations, including rural areas, areas close to state borders, and helps to ensure that every Oregonian has timely access to quality SLP and Audiology services. The Audiology Speech Language Pathology Interstate Compact (ASLP-IC) offers several benefits:

Improves continuity of care

I work at KidsCare and we serve patients in the state of Oregon, Idaho, Colorado, Texas, Florida, South Carolina, Virginia, and Maryland. Many of our patients reside in low-resource regions that are not equipped with the services that we are fortunate to provide. With our broad geographical catchment area, we are strongly in need of participation in the interstate compact so that our audiology and speech pathology colleagues can provide longitudinal care to patients, as needed. Virtual visits provide the ability to manage these patients across state lines and mitigates the need for expensive travel, housing, and time off work or school for both our patients and their caregivers.

Improves access to audiology and speech-language pathology providers

My Washington County district is always looking for more SLPs to serve our students and the community, and passing this bill would allow for both in person and tele-practice SLPs to more easily fill these positions.

Facilitates alternate delivery methods (Telehealth)

During the COVID-19 pandemic, many therapists were asked to assist in cases of SLPs who lived in the Vancouver area and were unable to commute to Portland for in-person service delivery. It was a hardship and delayed services during a time of uncertainty that those SLPs were required to obtain a Washington State license

before being able to serve public school students via telepractice. By enacting legislation to join the compact, HB 2357 will allow for the use of telehealth technology to facilitate increased access to audiology and speech-language pathology services in situations such as this.

Simplifies/speeds up the current process

ASLP-IC requires that an audiologist and speech-language pathologist be licensed in their home state but allowed to practice in a remote state through a privilege to practice. This allows the home state to continue to regulate while allowing the remote state to know who is practicing in their state and in what capacity without requiring audiologists and speech-language pathologists to obtain and maintain a license in every ASLP-IC state.

Practice of audiology and speech-language pathology occurs in the state where the patient/client is located at the time of the patient/client encounter. Currently 34 states and one U.S. territory have approved legislation and entered the interstate compact for SLPs. I could apply for privileges through the interstate compact that would enable me to provide continuity of care to my Oregon patients/clients if I needed to relocate or spend time in a different state.

HB 2357 offers a clear and organized path to improved patient care across state lines. These impacts will especially impact rural and otherwise underserved patients in our communities. Thank you in advance for your consideration and support of this bill,

Frankie Dow, M.S., CCC-SLP
Speech-Language Pathologist
KidsCare Home Health