



**State of Nevada**  
**Speech-Language Pathology, Audiology and Hearing Aid Dispensing Board**

## **NOTICE OF PUBLIC MEETING**

**Wednesday, July 21, 2021 ~ 4:30pm**

### **Location**

**Board Office ~ 6170 Mae Anne Avenue, Suite 1, Reno, Nevada 89523**

*Supporting materials relating to this meeting will be physically available but in an effort to reduce costs and preserve resources, attendees are encouraged to access electronic copies on the Board's website at <https://www.nvspeechhearing.org/about/Minutes.asp>*

### **Teleconference Access**

#### **ZOOM VIDEO & AUDIO:**

<https://us02web.zoom.us/j/88083334911?pwd=SVFTUEMwdTM1cnlFMdTVkbjVLWFM5Zz09>

**AUDIO ONLY BY TELEPHONE: (253) 215-8782**

**Meeting ID: 880 8333 4911      Passcode: 697716**

If you are outside the United States or need **toll-free audio access**, please contact the Board office at [board@nvspeechhearing.org](mailto:board@nvspeechhearing.org) to request a toll-free number no later than 3:00pm Pacific on the day of the meeting.

## **AGENDA**

The **STATE OF NEVADA SPEECH-LANGUAGE PATHOLOGY, AUDIOLOGY AND HEARING AID DISPENSING BOARD** may: (a) address agenda items out of sequence (b) combine agenda items or (c) pull or remove items from the agenda at any time. The Board may convene in closed session to consider the character, alleged misconduct, professional competence or physical or mental health of a person. (NRS 241.020, NRS 241.030).  
 Action by the Board on any item may be to approve, deny, amend, or table.

### **1. Call to Order, Confirmation of Quorum**

### **2. Public Comment**

*No vote may be taken upon a matter raised during a period devoted to public comment until the matter itself has been specifically included on an agenda as an item upon which action may be taken. (NRS 241.020)*

### **3. Approval of the Minutes: Board Meeting of April 21, 2021**

*(for possible action)*

### **4. Informational Session and Consideration for Participation in the Audiology & Speech Pathology Interstate Compact (ASLP-IC) With Guest Dan Logsdon, Director, National Center for Interstate Compacts**

*(for possible action)*

### **5. Legislative Report on Outcome of the 81<sup>st</sup> (2021) Session and Bills That May Impact the Board**

*(for possible action)*

**6. Review and Approval of FY 2022 Proposed Budget***(for possible action)***7. Discussion and Position on NSHA Request to Consider Board NRS/NAC Revision to Address Telehealth/Telesupervision and Medicaid “Under the Direction Of” Supervision***(for possible action)***8. Update/Discussion on Future Legislative Efforts to Consider Licensing Speech-Language Pathology Assistants (Standing Agenda Item)***(for possible action)***9. Update/Discussion on Future Legislative Efforts to Consider Licensing Audiology Assistants (Standing Agenda Item)***(for possible action)***10. Work Session to Consider Current and Potential Revisions to Licensee Continuing Education Requirements***(for possible action)***11. Disciplinary Matters: Recommendation for Dismissal - Case No. A21-01***(for possible action)***12. Executive Director’s Report***(for possible action)*

- a. Licensure Statistics
- b. FY21 Q4 and End of Fiscal Year Financial Reports
- c. Board Member Appointments/Reappointments
- d. Advisory Committee Meeting – August 11, 2021 at 4pm
- e. Complaints

**13. Report from Legal Counsel***(informational only)***14. Reports from Board Chair and Members***(for possible action)*

- a. Report from Board Chair and Board Members
- b. Next Meeting: Proposed for Wednesday, October 20, 2021 at 4:30pm
- c. Future Agenda Items
  - (1) Continued work on Future Legislative Efforts to Consider Licensing Speech-Language Pathology Assistants
  - (2) Continued work on Future Legislative Efforts to Consider Licensing Audiology Assistants
  - (3) Continued work on Jurisprudence Exam
  - (4) NAC Revisions for Public Workshop/Hearing Process
  - (5) Consideration of Recommendations from *Advisory Committee on Fitting and Dispensing Hearing Aids* meeting of August 11, 2021

**15. Public Comment**

*No vote may be taken upon a matter raised during a period devoted to public comment until the matter itself has been specifically included on an agenda as an item upon which action may be taken. (NRS 241.020)*

**16. Adjournment***(for possible action)*

*Public comment is welcomed by the Board. Public comment will be limited to five minutes per person and comments based on viewpoint will not be restricted. A public comment time will be available prior to action items on the agenda and on any matter not specifically included on the agenda as the last item on the agenda. At the discretion of the President, additional public comment may be heard when that item is reached. The Board Chair may allow additional time to be given a speaker as time allows and in his/her sole discretion. (NRS 241.020, NRS 241.030)*

*Prior to the commencement and conclusion of a contested case or a quasi-judicial proceeding that may affect the due process rights of an individual, the Board may refuse to consider public comment. (NRS 233B.126)*

*Persons with disabilities who require special accommodations or assistance at the meeting should contact the Board office at (775) 787-3421 or email at [board@nvspeechhearing.org](mailto:board@nvspeechhearing.org) no later than 48 hours prior to the meeting. Requests for special accommodations made after this time frame cannot be guaranteed.*

#### **THIS MEETING HAS BEEN PROPERLY NOTICED AND POSTED IN THE FOLLOWING LOCATIONS:**

<b>Office of the Attorney General</b> 100 N. Carson Street Carson City, Nevada 89701	<b>Office of the Attorney General</b> 5420 Kietzke Lane, Suite 202 Reno, Nevada 89511	<b>Grant Sawyer State Office Building</b> 555 E. Washington Avenue, #3900 Las Vegas, Nevada 89101
<b>Washoe County Courthouse</b> 75 Court Street Reno, NV 89501	<b>Nevada Speech-Language Pathology, Audiology and Hearing Aid Dispensing Board</b> 6170 Mae Anne Avenue, Suite 1 Reno, Nevada 89523	<b>Washoe County Clerk</b> 1001 E. 9th Street, Building A Reno, NV 89520
<b>Nevada Speech-Language Pathology, Audiology and Hearing Aid Dispensing Board Website</b> <a href="http://www.nvspeechhearing.org">www.nvspeechhearing.org</a>		<b>State of Nevada Administrative Website</b> <a href="http://www.nv.gov">www.nv.gov</a>

This agenda has been sent to all members of the Board and other interested persons who have requested an agenda from the Board. Persons who wish to continue to receive an agenda and notice must request so in writing on an annual basis.

Supporting material relating to public meetings of the Speech-Language Pathology, Audiology and Hearing Aid Dispensing Board is available at the Board's administrative offices located at 6170 Mae Anne Avenue, Suite 1, Reno, Nevada 89523 on the Board's website at <https://www.nvspeechhearing.org/about/Minutes.asp> or by contacting Jennifer R. Pierce, Executive Director by phone at (775) 787-3421 or email [board@nvspeechhearing.org](mailto:board@nvspeechhearing.org).

Anyone desiring additional information regarding the meeting is invited to call the Board office at (775) 787-3421.



State of Nevada  
Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board

## AGENDA ITEM 1

### Call to Order, Confirmation of Quorum

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Call to Order, Confirmation of Quorum.

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**ACTION:** Meeting called to order.

**ATTACHMENT(S):** None.



State of Nevada

Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board

## AGENDA ITEM 2

### Public Comment

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*No vote may be taken upon a matter raised during a period devoted to public comment until the matter itself has been specifically included on an agenda as an item upon which action may be taken. (NRS 241.020).*

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**ACTION:** None – INFORMATIONAL ONLY

**ATTACHMENT(S):** None.



State of Nevada  
Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board

## AGENDA ITEM 3

### Approval of the Minutes: Board Meeting of April 21, 2021

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The minutes of the meeting of April 21, 2021 are presented for approval.

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**ACTION:** Approve, table, or take no action on the matter.

**ATTACHMENT(S):**

1. 2021 4 21 Minutes ~ Not Yet Approved



State of Nevada  
**Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board**

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**MINUTES OF PUBLIC MEETING**

Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board

**April 21, 2021**

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**Members Present:** Tami Brancamp, Andrea Menicucci, Michael Hodes, Timothy Hunsaker, Bonnie Lamping, Thomas Rainford, Minnie Foxx

**Members Absent:** None

**Staff Present:** Jennifer Pierce, Executive Director  
 Stacey Whittaker, Licensing Coordinator  
 Henna Rasul, Sr. Deputy Attorney General, Board Counsel  
 Sarah Adler, Board Lobbyist  
 Alex Tanchek, Board Lobbyist

**Public Present:** Nancy Kuhles, NSHA/NV Coalition; Kim Reddig, NSHA

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**Call to Order, Confirmation of Quorum**

Tami Brancamp, Board Chair, called the meeting to order at 4:32pm. A roll call confirmed a quorum was present.

**Public Comment**

There was no public comment.

**Approval of the Minutes: Board Meetings of January 20, 2021 and February 24, 2021**

Tami Brancamp asked if there were any corrections or revisions to the minutes of the meeting of January 20, 2021 and none were noted. Tami Brancamp asked for a motion. Andrea Menicucci made a motion to approve the minutes of January 20, 2021 as written and Thomas Rainford seconded the motion. The motion passed.

Tami Brancamp asked if there were any corrections or revisions to the minutes of the meeting of February 24, 2021 and none were noted. Tami Brancamp asked for a motion. Andrea Menicucci made a motion to approve the minutes of February 24, 2021 as written and Timothy Hunsaker seconded the motion. The motion passed.

**Work Session on Assembly Bill 155 of the 81<sup>st</sup> (2021) Legislative Session to Increase Fee Caps in NRS 637B and Other Legislation That May Impact the Board**

Ms. Pierce reported that our bill failed to meet the Friday, April 9, 2021 legislative deadline to pass out of the Assembly Commerce and Labor Committee and shared feedback from at least one

*Minutes have not yet been approved and are subject to revision at the next meeting.*

legislator regarding the Board's past expenditures, particularly around personnel, and a suggestion that the Board continue to operate within its revenue for the next few years. Ms. Pierce reported that without the ability to consider an increase to actual fees, future budgets will be developed to support lean operations to support financial solvency until reserves are rebuilt or the Board can consider another fee cap proposal.

Ms. Pierce also reported out on three (3) specific bills that may impact the Board as follows:

- *SB 326 (BDR 54-614)* addresses Telehealth, authorizing a provider of health care who is licensed or certified in another state to register to use telehealth to provide services to patients located in this State at no cost. This bill may have an estimated financial impact on our Board in lost licensing revenue and increased costs estimated at \$23,000 in reviewing and registering these applicants without compensation.
- *SB 335 (BDR 54-186)* addresses Occupational Licensing Division & Fees, creating the Division of Occupational Licensing within the Department of Business and Industry, automatically moving six (6) healthcare Boards under the Department of Business and Industry, and requiring remaining healthcare Boards to contribute 5% of fees received to a state Occupational Licensing Account. The required 5% deposit of annual fee revenue would have a significant ongoing financial impact on our Board, estimated at \$8,000 to \$10,000 annually.
- *SB 402 (BDR 54-709)* addresses Reciprocity, authorizing certain qualified professionals to apply for a license by endorsement to practice in this State and requiring certain regulatory bodies to enter into reciprocal licensing agreements. This bill has no estimated financial impact at this time but adds Hearing Aid Specialists to our existing license by endorsement language. It is unknown what the compact/reciprocal agreement requirement would entail and how it would intersect with the available ASLP-IC Compact.

Sarah Adler, Board Lobbyist provided an update on the legislative session, reporting that yesterday (April 20, 2021) was the deadline for first House passage. She directed the Board to a legislation tracker in the Board packet and explained that all three bills summarized by Ms. Pierce have now been referred to the "money committees". It also appears that at least one bill related to telehealth has good momentum. There was discussion on the Board taking a position on SB 335 as we had declined to do so when seeking support for our own fee increase. Ms. Adler suggested that the Board, or herself in conjunction with Ms. Pierce and Dr. Brancamp (who has been authorized to act on behalf of the Board on legislative matters) could develop testimony, as necessary. Ms. Adler also suggested that since Senator Hardy is a sponsor for both SB 335 and 326 that perhaps a meeting with him would be useful and there was consensus to pursue this. No action was taken.

#### **Update on Practitioner Needs and Board Response to COVID-19**

Ms. Pierce reported that there have been no requests/needs identified by licensees or Board staff since the last meeting, however NSHA would like the Board to be aware of an issue related to Medicaid and SLPs providing telehealth services. Per NSHA, Medicaid is indicating that services provided via telehealth and requiring supervision to Bachelor level or Provisional SLPs are not reimbursable as there is no authority in NRS or NAC for telesupervision. This matter reportedly also extends to other professions employed by school districts and may result in significant revenue



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losses. NSHA has issued a position statement to request an emergency directive or similar from the Governor to temporarily allow telesupervision in these cases. A similar issue related to telesupervision for graduate programs, students, and clinical fellows was addressed by ASHA in February 2021. This new guidance, in effect until December 31, 2021, allows for telepractice with telesupervision within specific guidelines allowed by the Council for Clinical Certification in Audiology and Speech-Language Pathology (CFCC).

Ms. Pierce reiterated that our Board does not regulate supervision or billing and cannot waive current NRS or NAC, as all changes must follow the legislative or administrative rulemaking process. Our NRS allows for telehealth by our licensed Audiologists and SLPs.

Kim Reddig further reported that this issue will likely propel the work NSHA is taking on with the Nevada Department of Education to sunset bachelor's level SLPs in school settings and raise the minimum educational requirements to a master's degree. Ms. Reddig further shared that Medicaid has issued a memo that it will not seek recoupment for reimbursements paid between February 2020 and March 2021, but that no new claims will be paid going forward. No action was taken.

#### **Work Session on Future Legislative Efforts to Consider Licensing Speech-Language Pathology Assistants**

In the Board's January 20, 2021 meeting it was decided that this matter would be included as a standing agenda item but tabled for the foreseeable future, based on concurrent work between NSHA and the Nevada Department of Education to "sunset" Bachelor's level SLP providers in school settings. There was little discussion on this item, and both Tami Brancamp and Andrea Menicucci offered to participate as needed in future workgroups on this matter. No action was taken.

#### **Work Session on Future Legislative Efforts to Consider Licensing Audiology Assistants**

In the Board's January 20, 2021 meeting it was agreed that this is a separate and different conversation from SLPA licensing, and that the Board should continue to research and consider this as a new license type. Ms. Pierce provided several updates following the last meeting, including confirmation from ASHA that there are no plans to change the requirement that the supervising Audiologist be ASHA-certified, and affirmation that the American Academy of Audiology has published a position paper supporting the use of Audiology Assistants. There was discussion regarding the need for Audiology Assistants in Nevada, given that there are less than 100 licensed dispensing audiologists. It was also suggested that an audiology assistant candidate may not remain in that role for long or may find a more lucrative avenue through pursuit of training and licensing as a Hearing Aid Specialist. Ms. Pierce also reminded the Board that the failure of the legislative bill to increase fee caps will result in a tight budget in the next several years, which will limit the Board's ability to pursue legislative priorities. Ms. Pierce suggested that the Board could also consider changes to existing NAC, specifically NAC 637B.0442 which allows delegation to an unlicensed office assistant. There was consensus to keep this matter as a standing agenda item for continued discussion, and agreement that any effort to pursue legislation on this matter should be coupled with work towards SLP Assistants, if pursued. No action was taken.

#### **Work Session on Implementation of Licensee Jurisprudence Exam**

Ms. Pierce presented a draft timeline/project plan for the Board's consideration in implementing a licensee jurisprudence exam, which included decisions on exam requirements at this meeting, with

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work on exam content between April 2021 and December 2021, and implementation of an optional jurisprudence exam through the Board website/application system using free software in January 2022. The plan would then include monitoring exam use/results/efficacy during 2022 with review of and revision of questions as needed, and implementation of a required jurisprudence exam in January 2023. Depending on the Board's budget and reserves, consideration could also be given later to integrate the required exam with our licensing system at a one-time cost of \$6,000. Ms. Pierce reported that sample exams from Montana and New Jersey, provided by NCSB, were reviewed as examples, and suggested that multiple versions of the exam be developed, with a set of foundational ethics/professional responsibility questions and then practice-specific questions for each license type. There was discussion regarding the number of questions included, a required passing score, and frequency for licensees to complete the exam at renewal. It was agreed that firm decisions on these issues could be discussed at a later date, but that work should begin on the project.

Tami Brancamp asked for a motion. Thomas Rainford made a motion to accept the implementation timeline as presented and begin work on drafting the exam(s). Andrea Menicucci seconded the motion. The motion passed.

### **Welcome & Introductions of New Board Member Minnie Foxx (Public Member), Appointed 7/2/2020 to 7/1/2023**

This item was taken out of order after Ms. Foxx had joined the meeting. Ms. Foxx was welcomed to the Board and expressed that she is looking forward to working with the Board.

### **Disciplinary Matters: Recommendation for Dismissal - Case No. A20-02**

Ms. Pierce reported that this Complaint alleged fitting and dispensing hearing aids without having obtained a dispensing endorsement; unprofessional conduct; and patient abandonment. After investigation and review of all documentation received on this complaint, it was determined that there is insufficient evidence to file a formal complaint for hearing before the Board and the facts set forth in the accusations are insufficient to establish a violation of Chapter 637B of the Nevada Revised Statutes or the Nevada Administrative Code. This case is recommended for dismissal.

Tami Brancamp asked for a motion. Timothy Hunsaker made a motion to dismiss Case No A20-02 as recommended. Michael Hodes seconded the motion. The motion passed.

### **Executive Director's Report**

Tami Brancamp called on Jennifer Pierce who directed the members to the written report and summarized as follows:

#### **a. Licensure Statistics**

Licensing totals for the period January 1, 2021 through March 31, 2021 resulted in a net decrease of five (5) licenses (-0.4%).

- b. Fiscal Year 2021, 3<sup>rd</sup> Quarter ending March 31, 2021 Financial Report and DRAFT FY22 Budget**  
FY21 Q3 totals were reviewed, with total revenue at \$133,920.49 (85.85% of budget) and total expenses at \$131,830.67 (71.56% of budget). Net Income for this quarter is \$2,089.82 and total equity is \$64,030.37. Ms. Pierce summarized that the Board is reaping some benefits to cost-

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savings measures that have been implemented and revenue is somewhat higher than projected. Ms. Pierce also presented a draft FY22 budget that will have to be considered for approval at the Board's next meeting once the legislative session ends and we know whether any bills that financially impact the Board have passed.

**c. ASLP-IC Compact Update**

Per ASHA and the compact website, 10 states have now enacted compact legislation to date: Alabama, Kansas, Kentucky, Louisiana, Nebraska, North Carolina, Oklahoma, Utah, West Virginia, and Wyoming. It was reported that the compact will become operational when 10 states enacted legislation to participate. Legislation is also pending in the following 12 states: Colorado, Georgia, Indiana, Iowa, Maryland, New Hampshire, New Mexico, Ohio, Oregon, South Carolina, Texas, and Washington. We have confirmed Dan Logsdon, Director of the National Center for Interstate Compacts to attend our July 2021 meeting to provide the Board with more information on the Compact.

**d. SPOLR (State Controller Reports) Implementation**

Ms. Pierce informed the Board that the State Controller's Office (SCO) is implementing Section 4 of Senate Bill 21 of the 2013 legislative session, codified as NRS 353C.1965, requiring agencies providing professional or occupational licenses to submit biannual reports of license renewals to the State Controller's Office (SCO) in order to compare against the list of active debtors who owe the State of Nevada money. If a match is found, the SCO will send a certified letter to the debtor (licensee) requesting payment of the debt. If the debtor does not respond or does not pay the debt, SCO will notify the agency to not renew his/her license at the next renewal period. Our first report is due to SCO on August 1, 2021.

**e. Board Member Appointments/Reappointments**

Ms. Pierce confirmed that both Michael Hodes and Tami Brancamp have been reappointed and both terms expire 7/1/2023. We have also welcomed a new public member, Minnie Foxx, appointed from 7/2/2020 to 7/1/2031. Andrea Menicucci's first term is set to expire on 7/1/2021 and she reported that she plans to apply for reappointment. Unfortunately, this summer we will lose Thomas Rainford, BC-HIS whose final term expires on 7/1/2021. An email recruitment was sent to licensees on April 15, 2021 with attention to the Sunset Subcommittee's 2020 Interim Summary of Recommendations (#22) to "send a letter to certain regulatory bodies encouraging the recruitment of Black, Indigenous, and other persons of color as members to reflect the diversity of the state".

**f. Complaints**

Ms. Pierce reported that there were seven (7) outstanding complaints currently in the investigative process, though one of these was dismissed by the Board in an earlier agenda item in this meeting.

No action was taken.

**Report from Legal Counsel**

Henna Rasul, Board Counsel had no new information to report.

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## **Reports from Board Chair and Board Members**

### **a. Recognition of Board Service: Thomas Rainford, BC-HIS**

Tami Brancamp, Board Chair acknowledged Mr. Rainford who has served on this Board since 2015 and was a member of the former Hearing Aid Specialists Board. Mr. Rainford was thanked for his generous service and presented with a service award which will be mailed to him. Bonnie Lamping also thanked Mr. Rainford for his work in assisting during the 2015 merger of the two Boards and helping to ensure a seamless transition.

### **b. Report from Board Chair and Board Members**

Tami Brancamp shared with the Board that a new federal mandate has been issued to all educational programs that prepare graduates for licensed professions, requiring disclosure as to whether program components meet minimum requirements for licensing guidelines in each of the 50 states. Online programs were the first to begin complying with the mandate and traditional/on-campus programs are now in the process of doing so.

### **c. 2021 Proposed Meeting Schedule**

The next regular Board Meeting was confirmed for Wednesday, July 21, 2021 at 4:30pm via ZOOM Teleconference.

### **d. Future Agenda Items:**

Items for the next Board meeting will include:

1. Continued work on Future Legislative Efforts to Consider Licensing Speech-Language Pathology Assistants
2. Continued work on Future Legislative Efforts to Consider Licensing Audiology Assistants
3. Continued work on Jurisprudence Exam
4. Work Session to Consider Current and Potential Revisions to Licensee Continuing Education Requirements
5. ASLP-IC Compact Update & Presentation

## **Public Comment**

There was no public comment.

## **Adjournment**

Tami Brancamp adjourned the meeting at 6:46pm.



State of Nevada

Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board

## AGENDA ITEM 4

### Informational Session and Consideration for Participation in the Audiology & Speech Pathology Interstate Compact (ASLP-IC) With Guest Dan Logsdon, Director, National Center for Interstate Compacts

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Per ASHA and the compact website, **13 states have enacted compact legislation** to date: Alabama, Colorado, Georgia, Kansas, Kentucky, Louisiana, Maryland, Nebraska, North Carolina, Oklahoma, Utah, West Virginia, and Wyoming. Legislation is also **pending in the following 9 states**: Indiana, Iowa, New Hampshire, New Mexico, Ohio, Oregon, South Carolina, Texas, and Washington.

The National Center for Interstate Compacts (NCIC) at The Council of State Governments (CSG) is working with groups representing audiologists and speech-language pathologists to create and sustain ASLP-IC and is hosting a virtual legislative summit in August 2021 which Board staff will attend.

The ASLP-IC's stated goals are to:

1. *Increase public access to audiology and speech-language pathology services.*
2. *Enhance public protection by facilitating rapid exchange of disciplinary information among compact member states.*
3. *Encourage cooperation among member states in regulating multistate audiology and speech-language pathology practice.*
4. *Support spouses of relocating active-duty military personnel.*
5. *Leverage telehealth technology to facilitate increased access to audiology and speech-language pathology services.*

Any effort to enact compact legislation would have to be initiated during a legislative session in 2023 or later. Of note, SB100, seeking to bring Nevada into the Physical Therapists multi-state compact was NOT passed in the 2021 session. This was the second attempt by PT to pass a compact bill. Depending on the results of this conversation and the financial impact to the Board to enact legislation/participate, and the fees a potential licensee would incur to be licensed or register with NV, the Board may consider alternatives to the compact, such as revisions to our licensure by endorsement regulations and fees.

Dan Logsdon, Director of the National Center for Interstate Compacts will attend the July 21, 2021 meeting to provide the Board with more information and answer specific questions about the Compact.

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**ACTION:** Approve, table, or take no action on the matter.

#### **ATTACHMENT(S):**

1. *ASLP-IC Overview*
2. *ASLP-IC Draft Legislation*
3. *ASLP-IC Draft Legislation Section Descriptions*

# Audiology & Speech- Language Pathology Interstate Compact (ASLP-IC)

An overview of interstate compacts and in-depth information on the ASLP-IC's process development, requirements to participate, and benefits to states and consumers.

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## FOR ADDITIONAL INFORMATION

**Dan Logsdon** | [dlogsdon@csg.org](mailto:dlogsdon@csg.org) | 859-244-8226



## Interstate Compact Overview

An interstate compact is a powerful, durable, and adaptive tool for ensuring cooperative action among states. It can provide a state-developed structure for collaborative and dynamic action while building consensus among states. The nature of an interstate compact makes it the ideal tool to meet the demand for cooperative state action by developing and enforcing stringent standards while providing an adaptive structure that, under a modern compact framework, can evolve to meet new and increased demands over time.

General purposes for creating an interstate compact include:

- establishing a formal, legal relationship among states to address common problems or promote a common agenda;
- creating independent, multistate governmental authorities (e.g., Commissions) that can address issues more effectively than a state agency acting independently, or when no state has the authority to act unilaterally;
- developing uniform guidelines, standards, or procedures for agencies in the compact's member states;
- promoting economies of scale to reduce administrative and other costs;
- responding to national priorities in consultation or in partnership with the federal government;
- retaining state sovereignty in matters traditionally reserved for the states; and
- settling interstate disputes.

## Congressional Approval

Congress typically must first approve an interstate compact. Article I, Section 10 of the U.S. Constitution provides in part that “no state shall, without the consent of Congress, enter into any agreement or compact with another state.” Historically, this clause generally meant all compacts must receive congressional consent. However, the purpose of this provision was not to inhibit the states’ ability to act in concert with each other. In fact, by the time the Constitution was drafted, the states were already accustomed to resolving disputes and addressing problems through interstate compacts and agreements. The purpose of the compact clause was simply to protect the pre-eminence of the new national government by preventing the states from infringing upon federal authority or altering the federal balance of power by compact.

Accordingly, the Supreme Court indicated more than 100 years ago in *Virginia v. Tennessee*, 148 U.S. 503 (1893) that not all compacts require Congressional approval. Today, it is well established that only those compacts that affect a power delegated to the federal government or alter the political balance within the federal system, require the consent of Congress.

## State Constitutions Permit the Creation and/or Joining of Interstate Compacts

Compact language is usually drafted with state constitutional requirements common to most state constitutions such as separation of powers, delegation of power, and debt limitations in mind. The validity of the state authority to enter compacts and potentially delegate authority to an interstate agency has been specifically recognized and unanimously upheld by the U.S. Supreme Court in *West Virginia v. Sims*, 341 U.S.22 (1951).



## Interstate Compacts Are Common

Over 200 interstate compacts are in existence today. Typically, a state belongs to more than 20 interstate compacts.

## Types of Interstate Compacts

Although there are many types of interstate compacts that are generally divided into three types of compacts:

- **Regulatory Compacts:** The broadest and largest category of interstate compacts may be referred to as “regulatory” or “administrative” compacts. Such compacts are a development of the 20th century and embrace wide-ranging topics including regional planning and development, crime control, agriculture, flood control, water resource management, education, mental health, juvenile delinquency, child support, and so forth. Examples of such compacts include:
  - *Driver License Compact:* Exchange information concerning license suspensions and traffic violations of non-residents and forward them to the state where they are licensed known as the home state.
  - *Interstate Compact on Adult Offender Supervision:* Regulate the movement of adult offenders across state lines.
  - *Midwest Radioactive Waste Disposal Compact:* Regulate radioactive waste disposal.
  - *Washington Metropolitan Area Transit Regulation Compact:* Regulate passenger transportation by private carrier.
  - *1921 Port Authority of New York-New Jersey Compact:* Provides joint agency regulation of transportation, terminal, and commerce/trade facilities in the New York metropolitan area.

Regulatory compacts create ongoing administrative agencies whose rules and regulations may be binding on the states to the extent authorized by the compact.

- **Border Compacts:** Border compacts are agreements between two or more states that alter the boundaries of a state. Once adopted by the states and approved by Congress, such compacts permanently alter the boundaries of the state and can only be undone by a subsequent compact approved by Congress or the repeal of the compact with Congress's approval. Examples include the Virginia-Tennessee Boundary Agreement of 1803, Arizona-California Boundary Compact of 1963, the Missouri-Nebraska Compact of 1990, and the Virginia-West Virginia Boundary Compact of 1998.
- **Advisory Compacts:** Advisory compacts are agreements between two or more states that create study commissions. The purpose of the commission is to examine a problem and report back to the respective states on their findings. Such compacts do not result in any change in the state's boundaries nor do they create ongoing administrative agencies with regulatory authority. They do not require congressional consent because they do not alter the political balance of power between the states and federal government or intrude on a congressional power. An example of such a compact is the Delmarva Peninsula Advisory Council Compact (to study regional economic development issues), 29 Del. C. § 11101 (2003); Va. Code Ann. § 2.2- 5800 (2003).

## Regulatory Interstate Compacts in Health Care are Unique

Depending on the needs of the profession, interstate compacts addressing regulatory matters within the health care sector can be structured quite differently. Currently, there are several professions utilizing interstate compacts to address regulatory matters and each profession has taken a different approach when writing its compact language. For example, in comparing the professions of medicine and nursing, medicine chose to construct its compact to address expedited licensure; while nursing's compact creates a multistate license. Audiology and speech-language pathology has chosen to use the *privilege to practice* model that is currently being used by the physical therapists.

## Interstate Compacts Provide Many Advantages

Interstate compacts provide an effective solution to addressing multistate issues. Compacts enable the states, in their sovereign capacity, to act jointly and collectively, generally outside the confines of the federal legislative or regulatory process while respecting the view of Congress on the appropriateness of joint action. Interstate compacts can preempt federal involvement into matters that are traditionally within the purview of the states but have regional or national implications.

Compacts afford states the opportunity to develop dynamic self-regulatory systems that participating states can maintain control of through a coordinated legislative and administrative process. Compacts enable the states to develop adaptive structures that can evolve to meet new and increased challenges that naturally arise over time.

Interstate compacts can provide states with a predictable, stable, and enforceable instrument of policy control. The contractual nature of compacts ensures their enforceability on the participating states. The fact that compacts cannot be unilaterally amended ensures that participating states will have a predictable and stable policy platform for resolving issues. By entering into an interstate compact, each participating state acquires the legal right to require the other states to perform under the terms and conditions of the compact.

Interstate compacts may often require a great deal of time to develop and implement. While recent interstate compact efforts have met with success in a matter of a few years, some interstate compacts have required decades to reach critical mass. The purpose of an interstate compact is to provide for the collective allocation of governing authority between participating states. The requirement of substantive "sameness" prevents participating states from passing dissimilar enactments notwithstanding, perhaps, pressing state differences with respect to matters within the compact.

To the extent that a compact is used as a governing tool, they require, even in the boundary compact context, that participating states cede some portion of their sovereignty. The matter of state sovereignty can be particularly problematic when interstate compacts create ongoing administrative bodies that possess substantial governing power. Such compacts are truly a creation of the 20th century as an out-growth of creating the modern administrative state. However, as the balance of power continues to realign in our federalist system, states may only be able to preserve their sovereign authority over interstate problems to the extent that they share their sovereignty and work together cooperatively through interstate compacts.

## Interstate Compact Development

Compacts are contracts between states. To be enforceable, they must satisfy the customary requirements for valid contracts, including the notions of offer and acceptance. An offer is made when one state, usually by statute, adopts the terms of a compact requiring approval by one or more additional states to become effective. Other states accept the offer by adopting identical compact language. Once the required number of states has adopted the pact, the contract between them is valid and becomes effective as provided. The only other potential requirement is congressional consent.

## Interstate Compact Components

The compact should contain the minimum basics upon which it needs to operate, including the agreement between states and the operation of its governing body. The compact does not need to address every conceivable eventuality, nor should it. Its purpose is to provide the framework to build upon. The rules are the actuators of the compact and contain the details of state interaction, including:

- how information will be shared;
- standards and practices to be followed;
- forms that will be used; and
- timelines to be established.

By using the compact as the broad framework, the rules can be adapted and adjusted as needed throughout the life the compact without the need to go back each time for legislative approval from the member states, subject to the legislatively delegated authority.

# Audiology & Speech-Language Pathology Interstate Compact (ASLP-IC)

## Development Process

ASLP-IC is an interstate compact designed to allow licensed audiologists and speech-language pathologists to practice across state boundaries and through telepractice both legally and ethically without necessitating that an individual become licensed in every state to practice.

The development of any interstate compact should be a state-driven and state-championed solution for issues that cross state boundaries. The American Speech-Language-Hearing Association (ASHA), the national professional association for audiologists and speech-language pathologists, was approached by its members to develop a mechanism to assist in the regulation of interstate licensure and telepractice. Given ASHA's financial and operational abilities, ASHA agreed to underwrite the process and engage in a contract with the Council of State Governments, National Center for Interstate Compacts (CSG-NCIC). ASHA partnered with CSG-NCIC and the National Council of State Boards of Examiners in Speech-Language Pathology and Audiology (NCSB) to move forward with the ASLP-IC.

The initial process involved identifying an Advisory Group and Drafting Team.

- **Advisory Group:** The Advisory Group was composed of 16 members including state officials and representatives from state licensing boards, the U.S. Department of Defense, and national stakeholder organizations. They examined the challenges encountered by audiologists and speech-language pathologists providing interstate services, both in-person and through telepractice. The group then reviewed the feasibility of drafting a compact as a way of regulating interstate practice as well as meeting the request of the member boards to create an agreement between the states. The Advisory Group met in 2017. Their work culminated in a set of broad recommendations as to what the final compact product should entail.
- **Drafting Team:** The Drafting Team, a subset of the Advisory Group, was tasked with implementing, via a draft compact, the thoughts, ideas, and suggestions of the Advisory Group. The six-member Drafting Team, composed of compact and issue area experts, crafted the recommendations and provided their thoughts and expertise into the draft compact. The document was then open for comment in October 2018 for stakeholders. After the stakeholder feedback period, the Drafting Team made modifications as needed based on the feedback.

**ASLP-IC becomes operational** once 10 states enact ASLP-IC and enter the compact. The Advisory Group determined 10 states would be the critical mass needed to make ASLP-IC a useful and viable instrument to practice under the authority of ASLP-IC across state lines. Coincidentally, other compacts like the Physical Therapy Compact have used 10 states as a benchmark for their compact to become operational.

**When an ASLP-IC becomes operational** the ASLP-IC Commission is created. The Commission is the governing body of ASLP-IC and is responsible for its oversight and the creation of its Rules and Bylaws. Individual licensed audiologists and speech-language pathologists in ASLP-IC member state can then apply for a *privilege to practice*.

**The role of the ASLP-IC Commission** is the governing body of the ASLP-IC and is comprised of two representatives appointed from each ASLP-IC state licensing board; one representing the practice of audiology and one representing the practice of speech-language pathology. The Commission is responsible for implementing the Rules and Bylaws of the ASLP-IC.

**The ASLP-IC Commission operates** as the free-standing governing body of the ASLP-IC. NCSB will have one ex-officio, nonvoting member serve on the Executive Board of the Commission. A national audiology membership organization and a national speech-language pathology membership organization will also have one ex-officio, nonvoting membership each on the Executive Board of the Commission.

## Requirements for Audiologists and Speech-Language Pathologists to Participate

**The prevailing standard** in the United States for the profession of audiology is for an individual to possess a doctoral degree in audiology. The prevailing standard in the United States for the profession of speech-language pathology is for an individual to possess a master's degree in speech-language pathology.

**A licensed audiologist's or speech-language pathologist's participation in the ASLP-IC** requires that he or she meet a defined set of criteria as stated in the ASLP-IC. Through a state's participation in the ASLP-IC, an audiology or speech-language pathology licensing board does not conduct the full assessment and review as required when reviewing an individual's application for licensure. Rather, they rely on the ASLP-IC to vet an individual's qualifications and ensure that they meet this defined set of standards, such as not having any disciplinary issues, as those individuals participating in the ASLP-IC will not be reviewed by a board on a case-by-case basis.

**An audiologist who has graduated** with a master's degree in audiology prior to December 31, 2007, may obtain a *privilege to practice* under the ASLP-IC.

**If an ASLP-IC participating state does not require a separate license or certification to work** in a school, an individual who works in a school may obtain a *privilege to practice* under the ASLP-IC. That individual may work in a school in another participating state only if that state does not require a separate license or certification to do so.

Home State	Remote State	Privilege to Practice
One license	One license	Privilege to Practice
One license	DOE License/Cert required	DOE License/Cert required
DOE License/Cert required	DOE License/Cert required	DOE License/Cert required
DOE License/Cert required	One license	Privilege to Practice

If an ASLP-IC participating state does not require a separate license to dispense a hearing aid, a practitioner may obtain a *privilege to practice* under the ASLP-IC and will be able to continue to do so. If the remote state does require a separate license to dispense, the practitioner will have to obtain that license.

Home State	Remote State	Privilege to Practice
One license	One license	Privilege to Practice
One license	HAD license required	HAD license required
HAD license required	HAD license required	HAD license required
HAD license required	One license	Privilege to Practice

**An individual can no longer practice under the authority of the ASLP-IC if his or her state license is revoked.** An individual is still eligible to apply for licensure directly in any state, regardless of that state's participation in the ASLP-IC. By applying for licensure, the board will make the final, ultimate determination to decide if a license to practice audiology or speech-language pathology should be granted.

Section 3 – “G. The privilege to practice is derived from the home state license.”

Section 4 – “J. If a home state license is encumbered, the licensee shall lose the compact privilege in any remote state until the following occur:

1. The home state license is no longer encumbered; and
2. Two years have elapsed from the date of the adverse action.”

**If a *privilege to practice* is revoked because of an adverse action, every other state where a *privilege to practice* is held and where the home state license is held will determine if the privilege or license in that state is also revoked.**

**An audiologist's or speech-language pathologist's *privilege to practice* is not revoked while an audiologist or speech-language pathologist is in an alternative program.**

Section 7: “I. Nothing in this compact shall override a member state's decision that participation in an alternative program may be used in lieu of adverse action.”

**Continuing Education & the ASLP-IC.** A practitioner only needs to maintain their home state license and associated continuing education in order to obtain a *privilege to practice* in a remote state. The practitioner does not need to meet a remote state's continuing education requirements unless it relates to scope of practice issues. For example, if a remote state requires continuing education in supervision in order to supervise, the practitioner would be required to complete that continuing education requirement if they planned to supervise.

**ASLP-IC provides an accessible and manageable regulatory structure for the practice of audiology and speech-language pathology across state lines.** Advantages to consumers are increased access to care, an avenue for complaints, and a greater degree of public protection. Audiologists and speech-language pathologists also have a means to provide services in other states where they may not currently hold a license. ASLP-IC requires that an

audiologist and speech-language pathologist be licensed in their home state but allows 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.

## Impact on States

### Licensing requirements vary state to state.

As a means to promote compliance with laws as well as develop consistency in practice standards amongst states, ASLP-IC serves as mechanism in which states agree to accept audiologists and speech-language pathologists that have met a defined level of standards who are practicing in their state.

### The rules of the ASLP-IC are only applicable to states that enact ASLP-IC.

The rules of the ASLP-IC would only supersede any state law pertaining to the interjurisdictional practice of audiology and speech-language pathology.

### A state can withdraw from ASLP-IC by repealing the ASLP-IC Model Legislation.

The withdrawal shall not take effect until six (6) months after enactment of the repealing Statute. Withdrawal will not affect the continuing requirement of the withdrawing State's Audiology and Speech-Language Pathology Regulatory Authority to comply with the investigative and adverse action reporting requirements of this act prior to the effective date of withdrawal.

*Section 12 – “C. Any member state may withdraw from this Compact by enacting a statute repealing the same.”*

### ASLP-IC does not impact a state's right or ability to issue a license.

It is applicable only to the interjurisdictional practice of audiology and speech-language pathology precedence over state laws regarding this type of interjurisdictional practice.

## Impact on Audiologists and Speech-Language Pathologists

Once the ASLP-IC becomes operational, audiologists and speech-language pathologists can apply for the *privilege to practice* in ASLP-IC states.

By already being licensed in the home state and remote state, an individual has already established full rights to practice in these states and, therefore, an individual would not receive a *privilege to practice* through the ASLP-IC.

An audiologist or speech-language pathologist would need to cancel the license in the remote state and apply for a *privilege to practice* through the ASLP-IC.

## Impact on Consumers

### ASLP-IC is a mechanism that can ensure public protection and improve access to care



**while easing the barriers for competent and qualified audiologists and speech-language pathologists through the following:**

- All audiologists and speech-language pathologists must hold an active license in their home state.
- Although audiologists and speech-language pathologists are not required to have a license in the remote state, they must meet established criteria and have had no disciplinary sanctions in order to receive a *privilege to practice*.
- States will have access to a real-time, searchable database that provides information about where audiologists and speech-language pathologists are intending to practice within their state.
- ASLP-IC provides a structure for the remote state to revoke the audiologist's or speech-language pathologist's ability to practice within their state.
- Currently, states may not have the authority to impose discipline on their licensees for practice outside state boundaries. ASLP-IC allows the home state to impose discipline regarding the practice in other states.

Through ASLP-IC, states can be assured that the consumers will be receiving care from qualified audiologists and speech-language pathologists and have improved access to care. States will now have a means to identify audiologists and speech-language pathologists providing services in their state as well as have a procedure to address disciplinary sanctions.

**Through the ASLP-IC, consumers will have greater access to care.**

ASLP-IC will allow licensed audiologists and speech-language pathologists to provide continuity of care as clients, patients, and/or students relocate. Audiologists and speech-language pathologists will also be able to reach populations that are currently underserved, geographically isolated, or lack specialty care.

Additionally, states will have an external mechanism that accounts for all audiologists and speech-language pathologists who may enter their state to practice; thus, indicating audiologists and speech-language pathologists have met defined standards and competencies to practice in other states. ASLP-IC will also help states ensure the public will be better protected from harm.



# Section-by-Section



## PURPOSE

- Increase public access to audiology and speech-language pathology services by providing for the mutual recognition of other member state licenses;
- Enhance the states' ability to protect the public's health and safety;
- Encourage the cooperation of member states in regulating multistate audiology and speech-language pathology practice;
- Support spouses of relocating active duty military personnel;
- Enhance the exchange of licensure, investigative and disciplinary information between member states;
- Allow a remote state to hold a provider of services with a Compact privilege in that state accountable to that state's practice standards; and
- Allow for the use of telehealth technology to facilitate increased access to audiology and speech-language pathology services.

## SECTION 2 DEFINITIONS

This section is used to define the terms as used throughout the compact. This was done in an effort to alleviate confusion on the part of the states and practitioners.

## SECTION 3 STATE PARTICIPATION IN THE COMPACT

This section explains what requirements must be met by states to join the compact. To provide the services allowed by this compact the professional must hold a home state license in a compact state. Section B. Requires a FBI finger-print based criminal background check. Section E. & F. set out licensure requirements that states must meet.

### For an audiologist:

- Must meet one of the following educational requirements:
  - On or before, Dec. 31, 2007, has graduated with a Master's or Doctoral degree in audiology, or equivalent degree regardless of degree name, from a program that is accredited by an accrediting agency recognized by the Council for Higher Education Accreditation, or its successor, or by the United States Department of Education and operated by a college or university accredited by a regional or national accrediting organization recognized by the board; or
  - On or after, Jan. 1, 2008, has graduated with a Doctoral degree in audiology, or equivalent degree regardless of degree, name from a program that is accredited by an accrediting agency recognized by the Council for Higher Education Accreditation, or its successor or by the United States Department of Education and operated by a college or university accredited by a regional or national accrediting organization recognized by the board; or
  - Has graduated from an audiology program that is housed in an institution of higher education outside of the United States (a) for which the program and institution have been approved by the authorized accrediting body in the applicable country and (b) the degree program has been verified by an independent credentials review agency to be comparable to a state licensing board-approved program.

**For an audiologist (continued):**

- Has completed a supervised clinical practicum experience from an accredited educational institution or its cooperating programs as required by the Board;
- Has successfully passed a national examination approved by the Commission;
- Holds an active, unencumbered license;
- Has not been convicted or found guilty, or has entered into an agreed disposition, of a felony related to the practice of audiology, under applicable state or federal criminal law;
- Has a valid United States Social Security or National Practitioner Identification number.

**For a speech-language pathologist:**

- Must meet one of the following educational requirements:
  - Has graduated with a Master's degree from a speech-language pathology program that is accredited by an organization recognized by the United States Department of Education and operated by a college or university accredited by a regional or national accrediting organization recognized by the board; or
  - Has graduated from a speech-language pathology program that is housed in an institution of higher education outside of the United States (a) for which the program and institution have been approved by the authorized accrediting body in the applicable country and (b) the degree program has been verified by an independent credentials review agency to be comparable to a state licensing board-approved program.
- Has completed a supervised clinical practicum experience from an educational institution or its cooperating programs as required by the Commission;
- Has completed a supervised postgraduate professional experience as required by the Commission
- Has successfully passed a national examination approved by the Commission;
- Holds an active, unencumbered license;
- Has not been convicted or found guilty, or has entered into an agreed disposition, of a felony related to the practice of speech-language pathology, under applicable state or federal criminal law;
- Has a valid United States Social Security or National Practitioner Identification number.

**SECTION 4 COMPACT PRIVILEGE**

This section describes the requirements for gaining a privilege to practice.

- An audiologist or speech-language pathologist may only have one home state license at a time.
- A privilege to practice is renewable upon the renewal of the home state license.
- The audiologist or speech-language pathologist must function within the laws and regulations of the remote state.
- If the home state license is encumbered, the licensee shall lose the compact privilege in all remote states until the home state license is no longer encumbered and two years have passed since the adverse action.

**SECTION 5 COMPACT PRIVILEGE TO PRACTICE TELEHEALTH**

By accepting the compact the jurisdiction will allow for the practice of telehealth.

**SECTION 6 ACTIVE DUTY MILITARY PERSONNEL OR THEIR SPOUSES**

Active duty military personnel, or their spouse, may designate a home state where the individual has a current license in good standing. The individual may retain the home state designation during the period the service member is on active duty.

## SECTION 7 ADVERSE ACTIONS

This section explains how the compact, home and remote states will conduct and report adverse actions. As well as the consequences for an audiologist or speech-language pathologist who receives adverse actions.

- The home state may take adverse actions against an audiologist or speech-language pathologist license. A remote state may take adverse action on an audiologist or speech-language pathologist privilege to practice within that remote state.
- If the home state does take adverse action and audiologist or speech-language pathologist license is terminated and the privilege to practice in all remote states is revoked.
- All adverse actions taken should be reported to the Commission, in accordance to the rules of the Commission.
- If discipline is reported against an audiologist or speech-language pathologist, the audiologist or speech-language pathologist will not be eligible for a privilege to practice in accordance with the rules of the Commission.
- Other actions may be imposed as determined by the rules promulgated by the Commission.
- A home state's audiology or speech-language pathology regulatory authority shall investigate and take appropriate action with respect to reported inappropriate conduct engaged in by a licensee which occurred in a remote state as it would if such conduct had occurred by a licensee within the home state. In such cases, the home state's law shall control in determining any adverse action against an audiologist or speech-language pathologist license.
- A license revoked, surrendered in lieu of discipline or suspended following investigation of all services granted through the compact would be terminated.
- Nothing in the compact will override a compact state's decision that an audiologist or speech-language pathologist participation in an alternative program may be used in lieu of adverse action and that such participation shall remain non-public if required by the compact state's law.

## SECTION 8 ESTABLISHMENT OF THE AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY COMPACT COMMISSION

This section establishes the ruling commission of the compact. The compact is not a waiver of sovereign immunity.

- The commission shall consist of two voting delegates (one audiologist and one speech-language pathologist) appointed by each compact state who shall serve as that state's commissioner. The delegates are appointed by each states regulatory Board.
- An additional five (5) delegates, who are either a public member or board administrator from a state licensing board, shall be chosen by the Executive Committee from a pool of nominees provided by the Commission at Large.
- Vacancies of Commissioners must be filled in accordance of the laws of the compact state.
- Each commissioner is granted (1) vote in regard to creation of rules and bylaws and shall otherwise have the opportunity to participate in the business and affairs of the Commission.

## SECTION 9 DATA SYSTEM

This section denotes the requirement of sharing licensee information for all compact states. Notwithstanding any other provision of state law to the contrary, a compact state shall submit a uniform dataset to the Coordinated Database on all ASLP-IC audiologists and speech-language pathologists to whom this compact is applicable as required by the rules of the commission. This database will allow for the expedited sharing of adverse action against compact audiologists and speech-language pathologists. The coordinated database information will be expunged by the law of the reporting compact state.

## **SECTION 10 RULEMAKING**

This section describes the process for creating rules that will govern compact operations once the compact accepted by the first ten states.

## **SECTION 11 OVERSIGHT, DISPUTE RESOLUTION AND ENFORCEMENT**

This section details the oversight and enforcement of the compact by member states.

## **SECTION 12 DATE OF IMPLEMENTATION OF THE INTERSTATE COMPACT COMMISSION FOR AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY AND ASSOCIATED RULES, WITHDRAWAL AND AMENDMENT**

The compact becomes effective on the date of enactment in the tenth state. States that join after the adoption of the rules shall be subject to the rules as they exist on the date which the compact becomes law in that state. This section further describes the process for withdrawal from the compact and notes that amendments to the compact must be unanimous.

## **SECTION 13 CONSTRUCTION AND SEVERABILITY**

This compact shall be liberally construed so as to effectuate the purposes thereof. If this Compact shall be held contrary to the constitution of any state member thereto, the compact shall remain in full force and effect as to the remaining compact states.

## **SECTION 14 BINDING EFFECT OF COMPACT AND OTHER LAWS**

This compact shall be binding among and upon all member states and shall supersede any conflict with state law.

**FOR ADDITIONAL INFORMATION**

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# **Audiology and Speech-Language Pathology Interstate Compact (ASLP-IC)**

Approved by Project Advisory Group on March 31, 2019

## SECTION 1: PURPOSE

The purpose of this Compact is to facilitate interstate practice of audiology and speech-language pathology with the goal of improving public access to audiology and speech-language pathology services. The practice of audiology and speech-language pathology occurs in the state where the patient/client/student is located at the time of the patient/client/student encounter. The Compact preserves the regulatory authority of states to protect public health and safety through the current system of state licensure.

This Compact is designed to achieve the following objectives:

1. Increase public access to audiology and speech-language pathology services by providing for the mutual recognition of other member state licenses;
2. Enhance the states' ability to protect the public's health and safety;
3. Encourage the cooperation of member states in regulating multistate audiology and speech-language pathology practice;
4. Support spouses of relocating active duty military personnel;
5. Enhance the exchange of licensure, investigative and disciplinary information between member states;
6. Allow a remote state to hold a provider of services with a compact privilege in that state accountable to that state's practice standards; and
7. Allow for the use of telehealth technology to facilitate increased access to audiology and speech-language pathology services.

## SECTION 2: DEFINITIONS

As used in this Compact, and except as otherwise provided, the following definitions shall apply:

- A. **“Active duty military”** means full-time duty status in the active uniformed service of the United States, including members of the National Guard and Reserve on active duty orders pursuant to 10 U.S.C. Chapter 1209 and 1211.
- B. **“Adverse action”** means any administrative, civil, equitable or criminal action permitted by a state's laws which is imposed by a licensing board or other authority against an audiologist or speech-language pathologist, including actions against an individual's license or privilege to practice such as revocation, suspension, probation, monitoring of the licensee, or restriction on the licensee's practice.

- C. **“Alternative program”** means a non-disciplinary monitoring process approved by an audiology or speech-language pathology licensing board to address impaired practitioners.
- D. **“Audiologist”** means an individual who is licensed by a state to practice audiology.
- E. **“Audiology”** means the care and services provided by a licensed audiologist as set forth in the member state’s statutes and rules.
- F. **“Audiology and Speech-Language Pathology Compact Commission” or “Commission”** means the national administrative body whose membership consists of all states that have enacted the Compact.
- G. **“Audiology and speech-language pathology licensing board,” “audiology licensing board,” “speech-language pathology licensing board,” or “licensing board”** means the agency of a state that is responsible for the licensing and regulation of audiologists and/or speech-language pathologists.
- H. **“Compact privilege”** means the authorization granted by a remote state to allow a licensee from another member state to practice as an audiologist or speech-language pathologist in the remote state under its laws and rules. The practice of audiology or speech-language pathology occurs in the member state where the patient/client/student is located at the time of the patient/client/student encounter.
- I. **“Current significant investigative information”** means investigative information that a licensing board, after an inquiry or investigation that includes notification and an opportunity for the audiologist or speech-language pathologist to respond, if required by state law, has reason to believe is not groundless and, if proved true, would indicate more than a minor infraction.
- J. **“Data system”** means a repository of information about licensees, including, but not limited to, continuing education, examination, licensure, investigative, compact privilege and adverse action.
- K. **“Encumbered license”** means a license in which an adverse action restricts the practice of audiology or speech-language pathology by the licensee and said adverse action has been reported to the National Practitioners Data Bank (NPDB).
- L. **“Executive Committee”** means a group of directors elected or appointed to act on behalf of, and within the powers granted to them by, the Commission.

- M. **“Home state”** means the member state that is the licensee’s primary state of residence.
- N. **“Impaired practitioner”** means individuals whose professional practice is adversely affected by substance abuse, addiction, or other health-related conditions.
- O. **“Licensee”** means an individual who currently holds an authorization from the state licensing board to practice as an audiologist or speech-language pathologist.
- P. **“Member state”** means a state that has enacted the Compact.
- Q. **“Privilege to practice”** means a legal authorization permitting the practice of audiology or speech-language pathology in a remote state.
- R. **“Remote state”** means a member state other than the home state where a licensee is exercising or seeking to exercise the compact privilege.
- S. **“Rule”** means a regulation, principle or directive promulgated by the Commission that has the force of law.
- T. **“Single-state license”** means an audiology or speech-language pathology license issued by a member state that authorizes practice only within the issuing state and does not include a privilege to practice in any other member state.
- U. **“Speech-language pathologist”** means an individual who is licensed by a state to practice speech-language pathology.
- V. **“Speech-language pathology”** means the care and services provided by a licensed speech-language pathologist as set forth in the member state’s statutes and rules.
- W. **“State”** means any state, commonwealth, district or territory of the United States of America that regulates the practice of audiology and speech-language pathology.
- X. **“State practice laws”** means a member state’s laws, rules and regulations that govern the practice of audiology or speech-language pathology, define the scope of audiology or speech-language pathology practice, and create the methods and grounds for imposing discipline.
- Y. **“Telehealth”** means the application of telecommunication technology to deliver audiology or speech-language pathology services at a distance for assessment, intervention and/or consultation.



### **SECTION 3. STATE PARTICIPATION IN THE COMPACT**

- A. A license issued to an audiologist or speech-language pathologist by a home state to a resident in that state shall be recognized by each member state as authorizing an audiologist or speech-language pathologist to practice audiology or speech-language pathology, under a privilege to practice, in each member state.
- B. A state must implement or utilize procedures for considering the criminal history records of applicants for initial privilege to practice. These procedures shall include the submission of fingerprints or other biometric-based information by applicants for the purpose of obtaining an applicant's criminal history record information from the Federal Bureau of Investigation and the agency responsible for retaining that state's criminal records
  - 1. A member state must fully implement a criminal background check requirement, within a time frame established by rule, by receiving the results of the Federal Bureau of Investigation record search on criminal background checks and use the results in making licensure decisions.
  - 2. Communication between a member state, the Commission and among member states regarding the verification of eligibility for licensure through the Compact shall not include any information received from the Federal Bureau of Investigation relating to a federal criminal records check performed by a member state under Public Law 92-544.
- C. Upon application for a privilege to practice, the licensing board in the issuing remote state shall ascertain, through the data system, whether the applicant has ever held, or is the holder of, a license issued by any other state, whether there are any encumbrances on any license or privilege to practice held by the applicant, whether any adverse action has been taken against any license or privilege to practice held by the applicant.
- D. Each member state shall require an applicant to obtain or retain a license in the home state and meet the home state's qualifications for licensure or renewal of licensure, as well as, all other applicable state laws.
- E. For an audiologist:
  - 1. Must meet one of the following educational requirements:
    - a. On or before, Dec. 31, 2007, has graduated with a master's degree or doctorate in audiology, or equivalent degree regardless of degree name, from a program

- that is accredited by an accrediting agency recognized by the Council for Higher Education Accreditation, or its successor, or by the United States Department of Education and operated by a college or university accredited by a regional or national accrediting organization recognized by the board; or
- b. On or after, Jan. 1, 2008, has graduated with a Doctoral degree in audiology, or equivalent degree, regardless of degree name, from a program that is accredited by an accrediting agency recognized by the Council for Higher Education Accreditation, or its successor, or by the United States Department of Education and operated by a college or university accredited by a regional or national accrediting organization recognized by the board; or
  - c. Has graduated from an audiology program that is housed in an institution of higher education outside of the United States (a) for which the program and institution have been approved by the authorized accrediting body in the applicable country and (b) the degree program has been verified by an independent credentials review agency to be comparable to a state licensing board-approved program.
2. Has completed a supervised clinical practicum experience from an accredited educational institution or its cooperating programs as required by the Commission;
  3. Has successfully passed a national examination approved by the Commission;
  4. Holds an active, unencumbered license;
  5. Has not been convicted or found guilty, and has not entered into an agreed disposition, of a felony related to the practice of audiology, under applicable state or federal criminal law;
  6. Has a valid United States Social Security or National Practitioner Identification number.
- F. For a speech-language pathologist:
1. Must meet one of the following educational requirements:
    - a. Has graduated with a master's degree from a speech-language pathology program that is accredited by an organization recognized by the United States Department of Education and operated by a college or university accredited by a regional or national accrediting organization recognized by the board; or

- b. Has graduated from a speech-language pathology program that is housed in an institution of higher education outside of the United States (a) for which the program and institution have been approved by the authorized accrediting body in the applicable country and (b) the degree program has been verified by an independent credentials review agency to be comparable to a state licensing board-approved program.
  - 2. Has completed a supervised clinical practicum experience from an educational institution or its cooperating programs as required by the Commission;
  - 3. Has completed a supervised postgraduate professional experience as required by the Commission
  - 4. Has successfully passed a national examination approved by the Commission;
  - 5. Holds an active, unencumbered license;
  - 6. Has not been convicted or found guilty, and has not entered into an agreed disposition, of a felony related to the practice of speech-language pathology, under applicable state or federal criminal law;
  - 7. Has a valid United States Social Security or National Practitioner Identification number.
- G. The privilege to practice is derived from the home state license.
- H. An audiologist or speech-language pathologist practicing in a member state must comply with the state practice laws of the state in which the client is located at the time service is provided. The practice of audiology and speech-language pathology shall include all audiology and speech-language pathology practice as defined by the state practice laws of the member state in which the client is located. The practice of audiology and speech-language pathology in a member state under a privilege to practice shall subject an audiologist or speech-language pathologist to the jurisdiction of the licensing board, the courts and the laws of the member state in which the client is located at the time service is provided.
- I. Individuals not residing in a member state shall continue to be able to apply for a member **state's single**-state license as provided under the laws of each member state. However, the single-state license granted to these individuals shall not be recognized as granting the privilege to practice audiology or speech-language pathology in any other

member state. Nothing in this Compact shall affect the requirements established by a member state for the issuance of a single-state license.

- J. Member states may charge a fee for granting a compact privilege.
- K. Member states must comply with the bylaws and rules and regulations of the Commission.

#### **SECTION 4. COMPACT PRIVILEGE**

- A. To exercise the compact privilege under the terms and provisions of the Compact, the audiologist or speech-language pathologist shall:
  - 1. Hold an active license in the home state;
  - 2. Have no encumbrance on any state license;
  - 3. Be eligible for a compact privilege in any member state in accordance with Section 3;
  - 4. Have not had any adverse action against any license or compact privilege within the previous 2 years from date of application;
  - 5. Notify the Commission that the licensee is seeking the compact privilege within a remote state(s);
  - 6. Pay any applicable fees, including any state fee, for the compact privilege;
  - 7. Report to the Commission adverse action taken by any non-member state within 30 days from the date the adverse action is taken.
- B. For the purposes of the compact privilege, an audiologist or speech-language pathologist shall only hold one home state license at a time.
- C. Except as provided in Section 6, if an audiologist or speech-language pathologist changes primary state of residence by moving between two-member states, the audiologist or speech-language pathologist must apply for licensure in the new home state, and the license issued by the prior home state shall be deactivated in accordance with applicable rules adopted by the Commission.
- D. The audiologist or speech-language pathologist may apply for licensure in advance of a change in primary state of residence.
- E. A license shall not be issued by the new home state until the audiologist or speech-language pathologist provides satisfactory evidence of a change in primary state of

residence to the new home state and satisfies all applicable requirements to obtain a license from the new home state.

- F. If an audiologist or speech-language pathologist changes primary state of residence by moving from a member state to a non-member state, the license issued by the prior home state shall convert to a single-state license, valid only in the former home state.
- G. The compact privilege is valid until the expiration date of the home state license. The licensee must comply with the requirements of Section 4A to maintain the compact privilege in the remote state.
- H. A licensee providing audiology or speech-language pathology services in a remote state under the compact privilege shall function within the laws and regulations of the remote state.
- I. A licensee providing audiology or speech-language pathology services in a remote state is subject to that state's regulatory authority. A remote state may, in accordance with due process and that state's laws, remove a licensee's compact privilege in the remote state for a specific period of time, impose fines, and/or take any other necessary actions to protect the health and safety of its citizens.
- J. If a home state license is encumbered, the licensee shall lose the compact privilege in any remote state until the following occur:
  - 1. The home state license is no longer encumbered; and
  - 2. Two years have elapsed from the date of the adverse action.
- K. Once an encumbered license in the home state is restored to good standing, the licensee must meet the requirements of Section 4A to obtain a compact privilege in any remote state.
- L. Once the requirements of Section 4J have been met, the licensee must meet the requirements in Section 4A to obtain a compact privilege in a remote state.

## **SECTION 5. COMPACT PRIVILEGE TO PRACTICE TELEHEALTH**

Member states shall recognize the right of an audiologist or speech-language pathologist, licensed by a home state in accordance with Section 3 and under rules promulgated by the Commission, to practice audiology or speech-language pathology in any member state via telehealth under a privilege to practice as provided in the Compact and rules promulgated by the Commission.

## **SECTION 6. ACTIVE DUTY MILITARY PERSONNEL OR THEIR SPOUSES**

Active duty military personnel, or their spouse, shall designate a home state where the individual has a current license in good standing. The individual may retain the home state designation during the period the service member is on active duty. Subsequent to designating a home state, the individual shall only change their home state through application for licensure in the new state.

## **SECTION 7. ADVERSE ACTIONS**

- A. In addition to the other powers conferred by state law, a remote state shall have the authority, in accordance with existing state due process law, to:
  1. Take adverse action against an audiologist's or speech-language pathologist's privilege to practice within that member state.
  2. Issue subpoenas for both hearings and investigations that require the attendance and testimony of witnesses as well as the production of evidence. Subpoenas issued by a licensing board in a member state for the attendance and testimony of witnesses or the production of evidence from another member state shall be enforced in the latter state by any court of competent jurisdiction, according to the practice and procedure of that court applicable to subpoenas issued in proceedings pending before it. The issuing authority shall pay any witness fees, travel expenses, mileage and other fees required by the service statutes of the state in which the witnesses or evidence are located.
  3. Only the home state shall have the power to take adverse action against a audiologist's or speech-language pathologist's license issued by the home state.
- B. For purposes of taking adverse action, the home state shall give the same priority and effect to reported conduct received from a member state as it would if the conduct had occurred within the home state. In so doing, the home state shall apply its own state laws to determine appropriate action.
- C. The home state shall complete any pending investigations of an audiologist or speech-language pathologist who changes primary state of residence during the course of the investigations. The home state shall also have the authority to take appropriate action(s) and shall promptly report the conclusions of the investigations to the administrator of the

data system. The administrator of the coordinated licensure information system shall promptly notify the new home state of any adverse actions.

- D. If otherwise permitted by state law, the member state may recover from the affected audiologist or speech-language pathologist the costs of investigations and disposition of cases resulting from any adverse action taken against that audiologist or speech-language pathologist.
- E. The member state may take adverse action based on the factual findings of the remote state, provided that the member state follows the member state's own procedures for taking the adverse action.
- F. Joint Investigations
  - 1. In addition to the authority granted to a member state by its respective audiology or speech-language pathology practice act or other applicable state law, any member state may participate with other member states in joint investigations of licensees.
  - 2. Member states shall share any investigative, litigation, or compliance materials in furtherance of any joint or individual investigation initiated under the Compact.
- G. If adverse action is taken by the home state against an audiologist's or speech language pathologist's license, the audiologist's or speech-language pathologist's privilege to practice in all other member states shall be deactivated until all encumbrances have been removed from the state license. All home state disciplinary orders that impose adverse action against an audiologist's or speech language pathologist's license shall include a statement that the audiologist's or speech-language pathologist's privilege to practice is deactivated in all member states during the pendency of the order.
- H. If a member state takes adverse action, it shall promptly notify the administrator of the data system. The administrator of the data system shall promptly notify the home state of any adverse actions by remote states.
- I. Nothing in this Compact shall override a member state's decision that participation in an alternative program may be used in lieu of adverse action.

## **SECTION 8. ESTABLISHMENT OF THE AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY COMPACT COMMISSION**

- A. The Compact member states hereby create and establish a joint public agency known as the Audiology and Speech-Language Pathology Compact Commission:

1. The Commission is an instrumentality of the Compact states.
2. Venue is proper and judicial proceedings by or against the Commission shall be brought solely and exclusively in a court of competent jurisdiction where the principal office of the Commission is located. The Commission may waive venue and jurisdictional defenses to the extent it adopts or consents to participate in alternative dispute resolution proceedings.
3. Nothing in this Compact shall be construed to be a waiver of sovereign immunity.

**B. Membership, Voting and Meetings**

1. Each member state shall have two (2) delegates selected by that member state's licensing board. The delegates shall be current members of the licensing board. One shall be an audiologist and one shall be a speech-language pathologist.
2. An additional five (5) delegates, who are either a public member or board administrator from a state licensing board, shall be chosen by the Executive Committee from a pool of nominees provided by the Commission at Large.
3. Any delegate may be removed or suspended from office as provided by the law of the state from which the delegate is appointed.
4. The member state board shall fill any vacancy occurring on the Commission, within 90 days.
5. Each delegate shall be entitled to one (1) vote with regard to the promulgation of rules and creation of bylaws and shall otherwise have an opportunity to participate in the business and affairs of the Commission.
6. A delegate shall vote in person or by other means as provided in the bylaws. The bylaws may provide for delegates' participation in meetings by telephone or other means of communication.
7. The Commission shall meet at least once during each calendar year. Additional meetings shall be held as set forth in the bylaws.

**C. The Commission shall have the following powers and duties:**

1. Establish the fiscal year of the Commission;
2. Establish bylaws;
3. Establish a Code of Ethics;
4. Maintain its financial records in accordance with the bylaws;



5. Meet and take actions as are consistent with the provisions of this Compact and the bylaws;
6. Promulgate uniform rules to facilitate and coordinate implementation and administration of this Compact. The rules shall have the force and effect of law and shall be binding in all member states;
7. Bring and prosecute legal proceedings or actions in the name of the Commission, provided that the standing of any state audiology or speech-language pathology licensing board to sue or be sued under applicable law shall not be affected;
8. Purchase and maintain insurance and bonds;
9. Borrow, accept, or contract for services of personnel, including, but not limited to, employees of a member state;
10. Hire employees, elect or appoint officers, fix compensation, define duties, grant individuals appropriate authority to carry out the purposes of the Compact, and to establish the Commission's personnel policies and programs relating to conflicts of interest, qualifications of personnel, and other related personnel matters;
11. Accept any and all appropriate donations and grants of money, equipment, supplies, materials and services, and to receive, utilize and dispose of the same; provided that at all times the Commission shall avoid any appearance of impropriety and/or conflict of interest;
12. Lease, purchase, accept appropriate gifts or donations of, or otherwise to own, hold, improve or use, any property, real, personal or mixed; provided that at all times the Commission shall avoid any appearance of impropriety;
13. Sell convey, mortgage, pledge, lease, exchange, abandon, or otherwise dispose of any property real, personal, or mixed;
14. Establish a budget and make expenditures;
15. Borrow money;
16. Appoint committees, including standing committees composed of members, and other interested persons as may be designated in this Compact and the bylaws;
17. Provide and receive information from, and cooperate with, law enforcement agencies;
18. Establish and elect an Executive Committee; and

19. Perform other functions as may be necessary or appropriate to achieve the purposes of this Compact consistent with the state regulation of audiology and speech-language pathology licensure and practice.

#### D. The Executive Committee

The Executive Committee shall have the power to act on behalf of the Commission according to the terms of this Compact:

1. The Executive Committee shall be composed of ten (10) members:
  - a. Seven (7) voting members who are elected by the Commission from the current membership of the Commission;
  - b. Two (2) ex-officios, consisting of one nonvoting member from a recognized national audiology professional association and one nonvoting member from a recognized national speech-language pathology association; and
  - c. One (1) ex-officio, nonvoting member from the recognized membership organization of the audiology and speech-language pathology licensing boards.

#### E. The ex-officio members shall be selected by their respective organizations.

1. The Commission may remove any member of the Executive Committee as provided in bylaws.
2. The Executive Committee shall meet at least annually.
3. The Executive Committee shall have the following duties and responsibilities:
  - a. Recommend to the entire Commission changes to the rules or bylaws, changes to this Compact legislation, fees paid by Compact member states such as annual dues, and any commission Compact fee charged to licensees for the compact privilege;
  - b. Ensure Compact administration services are appropriately provided, contractual or otherwise;
  - c. Prepare and recommend the budget;
  - d. Maintain financial records on behalf of the Commission;
  - e. Monitor Compact compliance of member states and provide compliance reports to the Commission;
  - f. Establish additional committees as necessary; and

- g. Other duties as provided in rules or bylaws.
4. Meetings of the Commission
- All meetings shall be open to the public, and public notice of meetings shall be given in the same manner as required under the rulemaking provisions in Section 10.
5. The Commission or the Executive Committee or other committees of the Commission may convene in a closed, non-public meeting if the Commission or Executive Committee or other committees of the Commission must discuss:
- a. Non-compliance of a member state with its obligations under the Compact;
  - b. The employment, compensation, discipline or other matters, practices or procedures related to specific employees or other matters related to the Commission's internal personnel practices and procedures;
  - c. Current, threatened, or reasonably anticipated litigation;
  - d. Negotiation of contracts for the purchase, lease, or sale of goods, services, or real estate;
  - e. Accusing any person of a crime or formally censuring any person;
  - f. Disclosure of trade secrets or commercial or financial information that is privileged or confidential;
  - g. Disclosure of information of a personal nature where disclosure would constitute a clearly unwarranted invasion of personal privacy;
  - h. Disclosure of investigative records compiled for law enforcement purposes;
  - i. Disclosure of information related to any investigative reports prepared by or on behalf of or for use of the Commission or other committee charged with responsibility of investigation or determination of compliance issues pursuant to the Compact; or
  - j. Matters specifically exempted from disclosure by federal or member state statute.
6. If a meeting, or portion of a meeting, is closed pursuant to this provision, the Commission's legal counsel or designee shall certify that the meeting may be closed and shall reference each relevant exempting provision.

7. The Commission shall keep minutes that fully and clearly describe all matters discussed in a meeting and shall provide a full and accurate summary of actions taken, and the reasons therefore, including a description of the views expressed. All documents considered in connection with an action shall be identified in minutes. All minutes and documents of a closed meeting shall remain under seal, subject to release by a majority vote of the Commission or order of a court of competent jurisdiction.

8. Financing of the Commission

- a. The Commission shall pay, or provide for the payment of, the reasonable expenses of its establishment, organization, and ongoing activities.
- b. The Commission may accept any and all appropriate revenue sources, donations, and grants of money, equipment, supplies, materials, and services.
- c. The Commission may levy on and collect an annual assessment from each member state or impose fees on other parties to cover the cost of the operations and activities of the Commission and its staff, which must be in a total amount sufficient to cover its annual budget as approved each year for which revenue is not provided by other sources. The aggregate annual assessment amount shall be allocated based upon a formula to be determined by the Commission, which shall promulgate a rule binding upon all member states.

9. The Commission shall not incur obligations of any kind prior to securing the funds adequate to meet the same; nor shall the Commission pledge the credit of any of the member states, except by and with the authority of the member state.

10. The Commission shall keep accurate accounts of all receipts and disbursements. The receipts and disbursements of the Commission shall be subject to the audit and accounting procedures established under its bylaws. However, all receipts and disbursements of funds handled by the Commission shall be audited yearly by a certified or licensed public accountant, and the report of the audit shall be included in and become part of the annual report of the Commission.

F. Qualified Immunity, Defense, and Indemnification

1. The members, officers, executive director, employees and representatives of the Commission shall be immune from suit and liability, either personally or in their official capacity, for any claim for damage to or loss of property or personal injury or other civil liability caused by or arising out of any actual or alleged act, error or omission that occurred, or that the person against whom the claim is made had a reasonable basis for believing occurred within the scope of Commission employment, duties or responsibilities; provided that nothing in this paragraph shall be construed to protect any person from suit and/or liability for any damage, loss, injury, or liability caused by the intentional or willful or wanton misconduct of that person.
2. The Commission shall defend any member, officer, executive director, employee or representative of the Commission in any civil action seeking to impose liability arising out of any actual or alleged act, error, or omission that occurred within the scope of Commission employment, duties, or responsibilities, or that the person against whom the claim is made had a reasonable basis for believing occurred within the scope of Commission employment, duties, or responsibilities; provided that nothing herein shall be construed to prohibit that person from retaining his or her own counsel; and provided further, that the actual or alleged act, error, or omission did not result from that person's intentional or willful or wanton misconduct.
3. The Commission shall indemnify and hold harmless any member, officer, executive director, employee, or representative of the Commission for the amount of any settlement or judgment obtained against that person arising out of any actual or alleged act, error or omission that occurred within the scope of Commission employment, duties, or responsibilities, or that person had a reasonable basis for believing occurred within the scope of Commission employment, duties, or responsibilities, provided that the actual or alleged act, error, or omission did not result from the intentional or willful or wanton misconduct of that person.

**SECTION 9. DATA SYSTEM**

- A. The Commission shall provide for the development, maintenance, and utilization of a coordinated database and reporting system containing licensure, adverse action, and investigative information on all licensed individuals in member states.
- B. Notwithstanding any other provision of state law to the contrary, a member state shall submit a uniform data set to the data system on all individuals to whom this Compact is applicable as required by the rules of the Commission, including:
  - 1. Identifying information;
  - 2. Licensure data;
  - 3. Adverse actions against a license or compact privilege;
  - 4. Non-confidential information related to alternative program participation;
  - 5. Any denial of application for licensure, and the reason(s) for denial; and
  - 6. Other information that may facilitate the administration of this Compact, as determined by the rules of the Commission.
- C. Investigative information pertaining to a licensee in any member state shall only be available to other member states.
- D. The Commission shall promptly notify all member states of any adverse action taken against a licensee or an individual applying for a license. Adverse action information pertaining to a licensee in any member state shall be available to any other member state.
- E. Member states contributing information to the data system may designate information that may not be shared with the public without the express permission of the contributing state.
- F. Any information submitted to the data system that is subsequently required to be expunged by the laws of the member state contributing the information shall be removed from the data system.

**SECTION 10. RULEMAKING**

- A. The Commission shall exercise its rulemaking powers pursuant to the criteria set forth in this Section and the rules adopted thereunder. Rules and amendments shall become binding as of the date specified in each rule or amendment.

- B. If a majority of the legislatures of the member states rejects a rule, by enactment of a statute or resolution in the same manner used to adopt the Compact within 4 years of the date of adoption of the rule, the rule shall have no further force and effect in any member state.
- C. Rules or amendments to the rules shall be adopted at a regular or special meeting of the Commission.
- D. Prior to promulgation and adoption of a final rule or rules by the Commission, and at least thirty (30) days in advance of the meeting at which the rule shall be considered and voted upon, the Commission shall file a Notice of Proposed Rulemaking:
  - 1. On the website of the Commission or other publicly accessible platform; and
  - 2. On the website of each member state audiology or speech-language pathology licensing board or other publicly accessible platform or the publication in which each state would otherwise publish proposed rules.
- E. The Notice of Proposed Rulemaking shall include:
  - 1. The proposed time, date, and location of the meeting in which the rule shall be considered and voted upon;
  - 2. The text of the proposed rule or amendment and the reason for the proposed rule;
  - 3. A request for comments on the proposed rule from any interested person; and
  - 4. The manner in which interested persons may submit notice to the Commission of their intention to attend the public hearing and any written comments.
- F. Prior to the adoption of a proposed rule, the Commission shall allow persons to submit written data, facts, opinions and arguments, which shall be made available to the public.
- G. The Commission shall grant an opportunity for a public hearing before it adopts a rule or amendment if a hearing is requested by:
  - 1. At least twenty-five (25) persons;
  - 2. A state or federal governmental subdivision or agency; or
  - 3. An association having at least twenty-five (25) members.
- H. If a hearing is held on the proposed rule or amendment, the Commission shall publish the place, time, and date of the scheduled public hearing. If the hearing is held via electronic means, the Commission shall publish the mechanism for access to the electronic hearing.

1. All persons wishing to be heard at the hearing shall notify the executive director of the Commission or other designated member in writing of their desire to appear and testify at the hearing not less than five (5) business days before the scheduled date of the hearing.
  2. Hearings shall be conducted in a manner providing each person who wishes to comment a fair and reasonable opportunity to comment orally or in writing.
  3. All hearings shall be recorded. A copy of the recording shall be made available on request.
  4. Nothing in this section shall be construed as requiring a separate hearing on each rule. Rules may be grouped for the convenience of the Commission at hearings required by this section.
- I. Following the scheduled hearing date, or by the close of business on the scheduled hearing date if the hearing was not held, the Commission shall consider all written and oral comments received.
  - J. If no written notice of intent to attend the public hearing by interested parties is received, the Commission may proceed with promulgation of the proposed rule without a public hearing.
  - K. The Commission shall, by majority vote of all members, take final action on the proposed rule and shall determine the effective date of the rule, if any, based on the rulemaking record and the full text of the rule.
  - L. Upon determination that an emergency exists, the Commission may consider and adopt an emergency rule without prior notice, opportunity for comment, or hearing, provided that the usual rulemaking procedures provided in the Compact and in this section shall be retroactively applied to the rule as soon as reasonably possible, in no event later than ninety (90) days after the effective date of the rule. For the purposes of this provision, an emergency rule is one that must be adopted immediately in order to:
    1. Meet an imminent threat to public health, safety, or welfare;
    2. Prevent a loss of Commission or member state funds; or
    3. Meet a deadline for the promulgation of an administrative rule that is established by federal law or rule.
  - M. The Commission or an authorized committee of the Commission may direct revisions to a previously adopted rule or amendment for purposes of correcting typographical



errors, errors in format, errors in consistency, or grammatical errors. Public notice of any revisions shall be posted on the website of the Commission. The revision shall be subject to challenge by any person for a period of thirty (30) days after posting. The revision may be challenged only on grounds that the revision results in a material change to a rule. A challenge shall be made in writing and delivered to the chair of the Commission prior to the end of the notice period. If no challenge is made, the revision shall take effect without further action. If the revision is challenged, the revision may not take effect without the approval of the Commission.

## **SECTION 11. OVERSIGHT, DISPUTE RESOLUTION, AND ENFORCEMENT**

### **A. Dispute Resolution**

1. Upon request by a member state, the Commission shall attempt to resolve disputes related to the Compact that arise among member states and between member and non-member states.
2. The Commission shall promulgate a rule providing for both mediation and binding dispute resolution for disputes as appropriate.

### **B. Enforcement**

1. The Commission, in the reasonable exercise of its discretion, shall enforce the provisions and rules of this Compact.
2. By majority vote, the Commission may initiate legal action in the United States District Court for the District of Columbia or the federal district where the Commission has its principal offices against a member state in default to enforce compliance with the provisions of the Compact and its promulgated rules and bylaws. The relief sought may include both injunctive relief and damages. In the event judicial enforcement is necessary, the prevailing member shall be awarded all costs of litigation, including reasonable attorney's fees.
3. The remedies herein shall not be the exclusive remedies of the Commission. The Commission may pursue any other remedies available under federal or state law.

## **SECTION 12. DATE OF IMPLEMENTATION OF THE INTERSTATE COMMISSION FOR AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY PRACTICE AND ASSOCIATED RULES, WITHDRAWAL, AND AMENDMENT**

- A. The Compact shall come into effect on the date on which the Compact statute is enacted into law in the 10th member state. The provisions, which become effective at that time, shall be limited to the powers granted to the Commission relating to assembly and the promulgation of rules. Thereafter, the Commission shall meet and exercise rulemaking powers necessary to the implementation and administration of the Compact.
- B. Any state that joins the Compact subsequent to the Commission's initial adoption of the rules shall be subject to the rules as they exist on the date on which the Compact becomes law in that state. Any rule that has been previously adopted by the Commission shall have the full force and effect of law on the day the Compact becomes law in that state.
- C. Any member state may withdraw from this Compact by enacting a statute repealing the same.
  - 1. A member state's withdrawal shall not take effect until six (6) months after enactment of the repealing statute.
  - 2. Withdrawal shall not affect the continuing requirement of the withdrawing state's audiology or speech-language pathology licensing board to comply with the investigative and adverse action reporting requirements of this act prior to the effective date of withdrawal.
- D. Nothing contained in this Compact shall be construed to invalidate or prevent any audiology or speech-language pathology licensure agreement or other cooperative arrangement between a member state and a non-member state that does not conflict with the provisions of this Compact.
- E. This Compact may be amended by the member states. No amendment to this Compact shall become effective and binding upon any member state until it is enacted into the laws of all member states.

## **SECTION 13. CONSTRUCTION AND SEVERABILITY**

This Compact shall be liberally construed so as to effectuate the purposes thereof. The provisions of this Compact shall be severable and if any phrase, clause, sentence or provision

of this Compact is declared to be contrary to the constitution of any member state or of the United States or the applicability thereof to any government, agency, person or circumstance is held invalid, the validity of the remainder of this Compact and the applicability thereof to any government, agency, person or circumstance shall not be affected thereby. If this Compact shall be held contrary to the constitution of any member state, the Compact shall remain in full force and effect as to the remaining member states and in full force and effect as to the member state affected as to all severable matters.

#### **SECTION 14. BINDING EFFECT OF COMPACT AND OTHER LAWS**

- A. Nothing herein prevents the enforcement of any other law of a member state that is not inconsistent with the Compact.
- B. All laws in a member state in conflict with the Compact are superseded to the extent of the conflict.
- C. All lawful actions of the Commission, including all rules and bylaws promulgated by the Commission, are binding upon the member states.
- D. All agreements between the Commission and the member states are binding in accordance with their terms.
- E. In the event any provision of the Compact exceeds the constitutional limits imposed on the legislature of any member state, the provision shall be ineffective to the extent of the conflict with the constitutional provision in question in that member state.



State of Nevada

Speech-Language Pathology, Audiology &amp; Hearing Aid Dispensing Board

## AGENDA ITEM 5

### Legislative Report on Outcome of the 81<sup>st</sup> (2021) Session and Bills That May Impact the Board

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Sarah Adler, Board Lobbyist has provided a final report on the outcome of the 2021 legislative session for the Board's review (attached).

Three bills listed below were identified in April 2021 as having the potential for significant negative impact on our future budgets, yet **NONE** were passed this session.

Number	Topic	Summary/Impact
<b>SB 326</b> BDR 54-614	<b>Telehealth</b>	Authorized a provider of health care licensed or certified in another state to register to use telehealth to provide services to patients located in this State at no cost. <i>Would have had significant financial impact in loss of licensing revenue &amp; cost to review without compensation (approximately \$23k)</i>
<b>SB 335</b> BDR 54-186	<b>Occupational Licensing Division &amp; Fees</b>	Created the Division of Occupational Licensing within the Department of Business and Industry; automatically moves seven (7) Boards under B&I; requires remaining Boards to contribute 5% of fees to Occupational Licensing Account. <i>Would have had significant financial impact requiring deposit of 5% of annual fee revenue (8-10k annually).</i>
<b>SB 402</b> BDR 54-709	<b>Reciprocity</b>	Authorized certain qualified professionals to apply for a license by endorsement to practice in this State and required certain regulatory bodies to enter into a reciprocal agreement with other states. <i>No financial impact but would have added HAS to our existing license by endorsement language and required compact/reciprocal agreement.</i>

Legislation passed in the 2021 session that may directly impact our Board is listed in the attached summary from Silver State Government Relations.

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**ACTION:** Take action, table the matter, or take no action.

**ATTACHMENT(S):**

1. SSGR 2021 Legislative Session Final Report
2. SSGR Final Relevant Bills Speech Hearing 6 17 2021

# 81<sup>st</sup> Session of the Nevada Legislature 2021



## SILVER STATE

GOVERNMENT RELATIONS

### Final Report for

### Nevada Speech-Language Pathology, Audiology, and Hearing Aid Dispensing Board

#### Contents

Introduction

Bills of Interest – Passed

Bills of Interest – Failed

General Overview of Major Policy Actions of 2021 Legislature

#### Attachment

Detailed NV Speech Hearing Board Bill Tracker

Key: green shading – bill passed; red/pink shading – bill failed;  
yellow highlight – bill that may be of significance to Nevada  
Speech Hearing Board now or regarding future actions



## **Introduction**

Every legislative session is unique, with its own set of issues and challenges not faced by sessions past. The 2021 Session was no different, in that COVID-19 placed a tremendous set of hardships on the Nevada legislature in terms of budgeting, policymaking, and general operations. Due to the pandemic, restrictions were placed on access to the building and to lawmakers. Appointments had to be scheduled far in advance and conducted by electronic methods; no face-to-face interaction was allowed as members of the public were not allowed in the building until late in April, and then on a very limited, pre-planned basis. Committee meetings and bill hearings were all conducted using distance technologies, where members of the public and interested parties were required to follow a complex set of directions in order to have their voices heard.

Moreover, the State was facing a significant budget reduction relative to the previous biennium. With the shut-downs and then extremely limited access imposed in response to the pandemic, Nevada's sales and gaming tax revenue plummeted last fiscal year. Lawmakers and fiscal staff had challenges in determining how much tax revenue would be available in order to set the budget for this upcoming biennium.

Fortunately, by the end of session the fiscal outlook was less bleak. The May 6 meeting of the Economic Forum offered revenue projections on which the final biennial budget must be based, adding approximately \$600M in projected revenue; this allowed a set of 'add-backs' to State agency and education budgets. Additionally, the American Rescue Plan (ARP) made its way from the White House through Congress; it will bring approximately \$2.9B in recovery funding to Nevada. Governor Sisolak and other State Leaders have issued the [Every Nevadan Recovery Framework](#) to establish categories of use of those funds; [SB461](#) made specific allocations of those funds and also established priorities for uses of the funds.

This report summarizes bills of interest to the Nevada Speech Hearing Board either because of direct impacts on the Board's operation or as instructive in understanding various priorities and approaches supported by specific legislators. This second group may be beneficial to review in greater detail if the Speech Hearing Board undertakes to establish new licenses (such as Assistants) in the future. A brief overview of some of the major policy issues addressed by the 81<sup>st</sup> Legislature is attached at the end of this report. Presented as an Attachment to the electronic transmission of this report is a detailed Relevant Bill Tracker spreadsheet; cells have been highlighted in yellow to call attention to bills that have significance to the Board now, or potentially in the future.

## **Bills of Interest to Nevada Speech Hearing Board**

### **AB155 – Nevada Speech Hearing Board Fee Increase Request**

The Board is familiar with the entire process related to AB155 and, unfortunately, the outcome. However, a brief recap is in order:

- February 2020 Board contracts with Silver State Government Relations for lobbyist services and to secure a bill sponsor for a fee increase bill.



- Several months of work with Executive Director and Board to conduct licensee survey, establish level of fee increase, prepare materials, work with stakeholders.
- Secure bill sponsor, Assemblywoman Michelle Gorelow, finalized bill draft, bill introduced February 18, 2021 with additional primary sponsor Rochelle Nguyen and two co-sponsors Assemblywomen Considine and Martinez.
- Bill heard in Assembly Commerce and Labor on February 24, 2021; hearing successful, supporting materials posted to LCB website, Executive Director Pierce presented the bill via Zoom, answered questions effectively.
- Bill faced two headwinds: 1) Assembly Minority opposition to bills requiring 2/3 vote for passage deterred many Assembly Republicans from committing to vote for the bill, and 2) Assemblywoman Jill Tolles' opposition upon significant research on her part and her conclusion that the Board had paid insufficient attention to the impact on the Board's cash flow and reserves of authorized spending / disbursements. Despite these challenges, the sponsor stuck by the bill and multiple discussions occurred about possible ways to amend the bill to reduce its fiscal impact and allow it to move forward.
- However, with those two determining factors at the forefront, it was not possible to achieve the 2/3 vote needed at the full Assembly level and AB155 did not meet the first committee passage deadline, meaning the bill was dead. Assemblywoman Tolles did commit, however, to supporting a bill next session if the Board has shown at that time greater fiscal discipline.

Although the bill did not succeed, it is important to underscore the true excellence with which Executive Director Jennifer Pierce accomplished her responsibilities. Her thoroughness, timeliness, and quality of materials was superior.

### **Board Bills**

Prior to the session, stakeholders anticipated one or more bills consolidating some portion of Title 54 Occupational Licensing Boards into the State Department of Business and Industry (B&I). Governor Sisolak has at times criticized the latitude some boards have employed in policy-making and employment practices. However, no such bill came from the Governor's Office. Instead, Senator Joe Hardy took a major step by proposing SB335, which would have consolidated 6 boards into a Division of Occupational Licensing within B&I. The major effect of this initiative, as introduced, on Speech Hearing would have been to appropriate 5% of all boards' fees into the Division to fund its start-up/operating costs. While the bill received an Amend and Do Pass from the Senate Commerce and Labor committee, it was then referred to Senate Finance where it died.

Bills that did pass that affect board operations include:

AB 285: Sponsored by Assemblywoman Venicia Considine, addresses provisions of the Open Meeting Law related to meetings held using remote technology and providing notice of intent to act upon a proposed regulation. Speech Hearing already follows these practices.

AB 385: Sponsored by Assemblywomen Teresa Benitez-Thompson (Majority Leader) and Brittney Miller, limits the ability of boards to compensate officers and employees through fringe





benefits, bonuses, and exit pay; it does allow for purchasing service credit or other compensation related to retirement.

### **Licensing Bills**

Several bills sought to **streamline licensing for members of the military, military spouses, and/or veterans** by adjusting licensing through reciprocity or endorsement. SB402 and AB439 failed; SB44 passed, but only affects behavioral health licensing boards. Speech Hearing already provides for licensure streamlining for these populations.

AB330 requires that academic credit toward licensure be given to any courses of occupational or vocational training, or career and technical education that is approved by the State Department of Education.

Several bills made one or more **adjustments to the practice acts** of specific boards; these are useful to review and consider if Speech Hearing decides certain aspects of its current licensure requirements are unnecessary or barriers to access to the profession, or if it decides to seek licensure for additional professionals, such as Assistants. The bills in this area that passed include:

- SB184 – regarding physician’s assistants, facilitating licensure under two medical boards and removing requirement to retain national certification as a part of its Continuing Education requirements.
- AB73 – multiple revisions to practice act of licensed dietitians related to national exam, provision licenses, requiring maintaining good standing in national organization.
- AB173 – exempts professional engineers who are employed by public utilities from licensure by the State Board of Professional Engineers and Land Surveyors.
- AB210 – establishes relationships between businesses that employ chiropractors and chiropractic assistants and the licensed professionals.
- SB291 – added the Master Esthetician license under the State Board of Cosmetology.

Several bills seeking change practice acts, add licenses or new Boards failed, including:

- AB391 – sought to make multiple adjustments to the practice act of Dispensing Opticians; it made it through both houses but ultimately failed related to the Assembly (sponsor and requestor) not accepting the amended version from the Senate.
- AB401 – this bill and others discussed the degree to which criminal background checks should or should not be deployed/allowed for various professions.
- SB100 – seeking to bring Nevada into the physical therapists multi-state compact.
- SB178 – seeking to create a Shampoo Technologist license within the State Board of Cosmetology.
- SB271 – seeking to create the Board of Certified Professional Midwives (different than Licensed Midwife Nurse Practitioners).

### **Telehealth**

Given that increasing access to health care was a priority as the COVID pandemic rolled forward, the Special Session of the Legislature during the summer of 2020 had authorized health care delivery through telehealth. A few bills this session sought to address telehealth, including:





- SB5 – Passed - Requires insurers to reimburse for health care services delivered via telehealth by providers licensed in Nevada, including by telephone, although telephone services may be reimbursed at a lower rate; allows telehealth to be reimbursed at a lower rate than in-person health care delivery one year after the end of the COVID emergency; allows for patient-provider relationships to be established via telehealth, State Board of Health must adopt regulations for this; requires the establishment of a telehealth database to be maintained by the Patient Protection Commission to the extent funds are available.
- SB326 – Failed – Would have allowed for telehealth services to be delivered by providers licensed outside of Nevada upon registration with the commensurate Nevada licensing board.

### Data and Equity Bills

Several bills were introduced to collect data from providers, clients, and/or insurance companies, related to cost of services provided, means of providing service (e.g. telehealth), demographics of persons receiving (or not receiving) services, as well as other bills related to diversity, inclusion, and minority health equity. The goal is that by aggregating data and creating transparency, it will have positive effects on cost containment and health care access. These bills are detailed in the attached Bill Tracker; two are of significance to Speech Hearing.

SB222 – Although language on ‘boards and commissions’ was removed from the original bill, this bill requires state agencies to identify a ‘diversity and inclusion’ liaison to engage in annual discussions and reporting among state agencies related to these issues. However, the bill is clearly targeted at state agencies and contains language related to ‘reasonable effort’ and ‘to the extent practicable’. It is doubtful that the participation of a Board with the functions and number of licensees of Speech Hearing is expected to participate fully, if at all.

SB40 – Seeks to create an all-payer claims database, to the extent that Federal funds are available. Medicaid can be billed for tracking Medicaid claims. Any insurer who insures a public entity (e.g. PERS) must participate. Attempting to incent other insurers to report data by only providing access to database to insurers who report. Ultimately, once this database is established, there may be transparency related to insurance payments for services provided by Speech Hearing licensees.

### In General - Major Policy Issues Addressed by 2021 Nevada Legislature

Below, in alphabetical order, are brief highlights of some of the most active **policy areas** addressed in the 81<sup>st</sup> Session of the Nevada Legislature. For an excellent narrative on major policy issues, and links to associated bills, we encourage you to visit this [Legislative Issues Recap](#) from the team at the Nevada Independent.

In terms of the State Budget, it was rescued by better than expected projections from the Economic Forum on which the final budget is based, as well as an anticipated \$2.7B from the American Rescue Plan. Without these substantial boosts, resources for State employees and to move many policy goals forward would have been absent.



**Affordable Housing** – Bills with the goal of preserving as affordable existing affordable housing (SB12), improving the workability of the state’s existing affordable housing tax credit (SB284), reducing barriers to housing access for formerly incarcerated individuals (SB254), and requiring local jurisdictions to accommodate ‘tiny homes’ in their zoning (SB150) passed. Bills that would have permitted the creation of local revenue and improved planning for affordable housing (AB434 and AB441) and prevented housing discrimination based upon the prospective tenant’s source of Income (such as a housing voucher, AB317) failed.

**Criminal justice reform** – Several bills decriminalized acts that are currently punishable by jail time, including AB116 - traffic tickets, AB403 - jaywalking, and SB219 – suspending drivers licenses when individual cannot afford to pay fines and fees for minor traffic offenses. **Senate Bill 212** prohibits police officers from using deadly force before trying de-escalation techniques. The bill bars officers from firing non-lethal rounds “indiscriminately” into a crowd or targeting a person’s head, pelvis or other vital areas.

**Education** – A new education funding formula – the Pupil Centered Funding Plan – was introduced in SB439, and amended by SB458 (K-12 funding bill). School districts that receive less money under the new plan are ‘held harmless’ with a supplemental allocation; charter schools were eventually provided ‘hold harmless’ via SB463.

AB495 – mining tax - would create a new excise tax on gold and silver mining companies with more than \$20M in gross revenue annually. Gross revenue between \$20M and \$150M would be taxed at 0.75% and gross revenue above \$150M would be taxed at a rate of 1.1%. By next biennium it is estimated to provide an additional \$300M for education.

**Elections** – Unlike many states across the country, the Nevada Legislature did NOT reduce access to the ballot box, rather but increased it.

AB126 – creates a presidential primary on the first Tuesday in February

AB321 – permanent mail in ballot, also provides for in person voting and drop box options.

AB442 – top-down voter registration database managed by the Secretary of State’s office; this will improve election security and allow results to be reported faster

SB292 – which would have allowed for straight ticket voting, was removed in a compromise over the mining tax

SJR9 – calling for creation of a nonpartisan redistricting commission did not get a hearing

**Energy** – SB448 – provides for the construction of the ‘Green Link’ , a transmission line between Las Vegas and Yerington, and a line between Yerington and Ely. This will allow for the transmission of renewable energy created in Nevada throughout Nevada and also allow it to be sold out of state. The bill also will invest 100M in electric vehicle charging stations

AB383 – requires energy efficient appliances

**Eviction protections** – In the last days an emergency measure, AB486, was introduced and passed that will connect eviction proceedings, the Supreme Courts mediation program, and rental assistance to prevent tenants from being locked out while applications, which are currently backlogged in Clark County, are being approved. AB141 seals summary eviction records for evictions associated with the COVID pandemic.



AB308 establishes a three day grace period on late fees and increases the time of notification prior to rent increases.

**Firearms** – AB286 – banning the sale of ‘ghost guns’ (assembled from a kit, having no serial number), passed.

SB452 – allowing hotel casinos to ban all firearms, including concealed carry holders’, passed the Senate but received no hearing in the Assembly.

**Health Care** – Public Option – SB420 begins with actuarial studies to determine whether the goal of requiring private insurers to offer a discounted health plan that could be sold on or off the state’s health exchange at 5% less than current silver plan cost, with a 15% reduction over 4 years. Requirements will not take effect until 2026, if they are actuarially viable.

SB380 – will collect data on prescription drug pricing.

SB396 – allows for collective purchasing by public agencies of prescription drugs.

**Immigrant assistance** – SB347, a bill on campus sexual misconduct, was amended in the very last hours of session to allow the children of immigrants to apply for the Millennium and Silver State Opportunity Scholarships by removing the requirement that applicants complete the FAFSA, which requires a social security number. It also incorporated AB376, the Keep NV Working Task Force on immigrant entrepreneurship and providing \$500,000 to UNLV’s Immigration Clinic.

**Mental Health/Substance Use Disorders** – Multiple bills will work together to improve the mental health crisis response system and capabilities in Nevada. SB70 made multiple improvements to the legal ‘mental health crisis hold’ process; SB156 creates crisis stabilization centers as an alternative to mental health patients having to wait in emergency rooms for inpatient treatment beds; AB154 allows the state to apply to Medicaid for an IMD exclusion waiver, allowing for more inpatient treatment of Medicaid recipients; AB181 provides oversight of insurers to assure that mental health is treated on parity with physical health; SB390 stands up 9-8-8, the new mental health crisis national hotline and creates the Fund for Healthy Nevada communities, which allows for funding of needs related to opioids, substance addiction, and co-occurring disorders from opioid settlement funds; AB374 creates a Substance Use Disorder Working group; another bill allows for mental health days to be an excused absence from K-12 school.

**Tribal bills** – AB262 – waives tuition and fees for Native American students from Nevada tribes as Nevada institutions of higher education. Several other bills added tribal representation to various advisory committees and enabled Stewart Indian Museum to engage in other forms of fundraising.

#### **Unemployment – Department of Employment, Training, and Rehabilitation**

SB461 – provides for \$335M from the American Rescue Plan to replenish the unemployment trust fund to the extent that unemployment tax rates will not have to be increased to pay debt service on a loan from the federal government. A late session bill provides funding for an overhaul of DETR technology systems to improve security against fraud and claims processing time.

Bill	Updated Text	Requester	Title	Comments	Status	First House Vote	Second House Vote	Categories
<a href="#">AB002</a>	<a href="#">As Enrolled</a>	Nevada Association of Counties	AN ACT relating to public bodies; removing the prohibition against gubernatorial appointees serving simultaneously on more than one board, commission or similar body		05/25: Approved by the Governor.	42-0	Y: 21 N: 0	Board member bill
<a href="#">AB385</a>	<a href="#">As enrolled</a>	Aswm Benitez-Thompson and Miller	AN ACT relating to public employment; revising provisions relating to the compensation received by officers and employees of certain public bodies; and providing other matters properly relating thereto	prohibits a public body from entering into an employment contract that entitles an officer or employee of the public body to receive: (1) any fringe benefit, unless the public body has adopted a policy authorizing all persons employed in a similar position to receive the benefit; (2) any bonus, unless the bonus is based on merit and awarded at a public meeting; and (3) certain wages or other payments upon the termination of the employment for cause or resignation when an investigation is pending. A public body may enter into an agreement to pay the cost of purchasing credit for service on behalf of an officer or employee pursuant to NRS 286.3007 or under any other retirement or pension program, if applicable	Approved by Governor	Y: 26 N: 16	Y: 12 N: 9	Board; employment contract restrictions
<a href="#">AB253</a>	<a href="#">As Enrolled</a>	Asm. Considine	revising provisions relating to when a subcommittee or working group of a public body is subject to the Open Meeting Law; setting forth certain requirements for meetings of public bodies that use remote technology systems; revising requirements for notice of intent to act upon a regulation	requires what Speech Hearing is doing already re: public access to materials and participation in meetings	05/31: Approved by the Governor.	Y: 28 N: 14	Y: 18 N: 3	Board; Open meeting law

Bill	Updated Text	Requester	Title	Comments	Status	First House Vote	Second House Vote	Categories
<a href="#">SB335</a>	<a href="#">1st Reprint</a>	Sen. Hardy	AN ACT relating to professional licensing; creating the Division of Occupational Licensing within the Department of Business and Industry; creating the position of Administrator of the Division; setting forth the powers and duties of the Division and the Administrator; creating the Occupational Licensing Account; requiring each board that regulates a provider of health care to comply with certain requirements relating to the creation, retention and public disclosure of records; requiring 5 percent of the fees received by each such board to be deposited in the Occupational Licensing Account; abolishing certain boards that regulate certain professions and occupations; transferring the powers and duties of such boards to the Division; revising the membership of the Board of Medical Examiners and the State Board of Osteopathic Medicine	Would have created the Division of Occupational Licensing within the Dept. of Business and Industry, bringing a disparate group of 5 boards into the Division, funded by 5% of the fees of all Title 54 licensing boards. It did not receive a hearing in Senate Finance, where the fiscal implications of taking 5% of fees would have been debated.	04/09: S. Com (Amend and do pass) 04/21: Exempt - referred to Senate Finance			Board
<a href="#">AB348</a>	<a href="#">As Enrolled</a>	Assm. Carlton	Transferring the Patient Protection Commission from the Office of the Governor to DHHS ; requiring the Commission to coordinate and administer certain assistance	Database aspects were removed due to cost and duplication, effect of the bill is to move PPC into DHHS and require its coordination with DHHS Office of Data and Analytics	05/27: Approved by the Governor.	Y: 26 N: 16	Y: 12 N: 9	Data bill
<a href="#">SB040</a>	<a href="#">As Enrolled</a>	Patient Protection Commission	The bill requires, <b>to the extent that federal money is available</b> for this purpose, the Department of Health and Human Services to establish an all-payer claims database of information relating to health insurance claims resulting from medical, dental or pharmacy benefits provided in this State. DHHS shall establish an advisory committee regarding collection, access to, security of, and reporting of data. Any public or private insurer that provides health benefits and is regulated under state law, with certain exceptions, is required to submit data to the database. Certain insurers that are regulated under federal law are authorized to submit data to the database; all data must be de-identified.	Goal is to shine more light on health care costs by creating an all-payer claims database, and Medicaid can be billed for tracking Medicaid claims. Any insurer who insures a public entity (e.g. PERS) must participate. Attempting to get other insurers to report data by only providing access to database to insurers who report.	06/04: Approved by the Governor.	Y: 14 N: 7	Y: 26 N: 16	Data bill

Bill	Updated Text	Requester	Title	Comments	Status	First House Vote	Second House Vote	Categories
<a href="#">AB278</a>	<a href="#">As Enrolled</a>	Assm. Duran	AN ACT relating to health care; requiring a physician to complete a data request when renewing his or her license or registration; requiring licensing boards that license physicians to make the data request available to applicants for the renewal of a license or registration; requiring the Department of Health and Human Services to collect, maintain and report on information received from the data requests	Makes a data request via license renewal of physicians to determine by whom are employed (hospital, health system, group or solo practice). No penalty for refusing to complete data request. DHHS makes annual report.	05/27: Approved by the Governor.	Y: 26 N: 16	Y: 20 N: 1	data bill
<a href="#">SB109</a>	<a href="#">As Enrolled</a>	Sen. Spearman	AN ACT requiring governmental agencies to request from certain persons information related to sexual orientation and gender identity; requiring a governmental agency to annually report certain information related to sexual orientation and gender identity to the Director of LCB	The data requests within the bill for information related to sexual orientation and gender identity <b>applies only to agencies that already collect race and ethnicity information</b> ; individuals may choose not to provide information.	06/06: Approved by the Governor.	Y: 14 N: 7	Y: 26 N: 15	equity; data bill
<a href="#">SB222</a>	<a href="#">As Enrolled</a>	Senator Scheible	AN ACT ;requiring a state agency (including Boards) with reasonable effort <i>and to the extent practicable</i> to collaborate with minority groups and provide certain information to minority groups; requiring, with certain exceptions, a state agency to designate and provide contact information for a diversity and inclusion liaison; requiring the Office of Minority Health and Equity of the DHHS , the Nevada Commission on Minority Affairs of B & I, and the Office for New Americans in the Office of the Governor to facilitate an annual meeting between diversity and inclusion liaisons and minority groups and submit a report to the Governor and the Legislative Commission.	Language regarding Boards and commissions was specifically removed from the bill; however, 'state agency' is inclusive of licensing boards. Given the language in Sections 9 and 10 regarding reasonable effort and to the extent practicable, it does not appear there are any penalties for not naming a diversity and inclusion liaison.	Approved by Governor	Y: 17 N: 4	Y: 30 N: 11	Equity
<a href="#">SB302</a>		Sen. Spearman	revising provisions relating to the Office of Minority Health and Equity of the Department of Health and Human Services; declaring the policy of this State concerning employee diversity for state employers; requiring public employers to provide racial equity training to the extent of money available;		04/07: S. Gov (Do pass) 4/12: Exempt Referred to Senate Finance			equity; Employee; diversity

Bill	Updated Text	Requester	Title	Comments	Status	First House Vote	Second House Vote	Categories
<a href="#">SCR055</a>	<a href="#">As Enrolled</a>	Sen. Spearman	Urging certain actions to address the public health crisis caused by systemic racism and greatly magnified by the COVID-19 pandemic in Nevada.	Concurrent resolutions are symbolic policy statements, this one declares a health crisis exists due to systematic racism	05/21: Enrolled and delivered to Secretary of State.	Adopted	Adopted	Equity
<a href="#">AB155</a>		Assm. Gorelow	AN ACT relating to professions; increasing the maximum amount of certain fees imposed by the Speech-Language Pathology, Audiology and Hearing Aid Dispensing Board	Could not achieve the 2/3 vote Committee Chair required to move the bill forward from the Committee to Assembly floor; barrier was the analysis (by Assemblywoman Jill Tolles) of Board's prior authorization of spending being deemed excessive and need for Board to show fiscal discipline	02/24: A. Com (No action)			fee bill
<a href="#">SB099</a>		Sen. Seevers Gansert	AN ACT relating to governmental administration; requiring each bill or joint resolution introduced in the Legislature to include a statement concerning whether the bill or resolution creates, generates or increases public revenue of the State or a local government in any form		06/01: No further action allowed.			Fees; reporting
<a href="#">SB402</a>	<a href="#">1st Reprint</a>	Sen. Committee on Commerce and Labor	AN ACT relating to regulatory bodies; revising provisions relating to certain reciprocal agreements; authorizing certain qualified professionals to apply for a license by endorsement to practice in this State; requiring certain licenses for educational personnel be issued within 30 days after receiving the application for the license; requiring certain boards and commissions to submit an annual report to the Sunset Subcommittee; authorizing the Governor to suspend the authority of a board if the board or commission fails to submit such an annual report; requiring the Legislative Counsel to create a system for monitoring the progress of an agency in adopting certain permanent regulations; requiring the summary of certain legislative measures to include information concerning whether the legislative measure grants rulemaking authority	Bill sought changes to licensure practices related to reciprocity and endorsement; primarily military, military spouses, veterans bill; also would have required reporting on time to accomplish licensure. Speech Hearing Board already has these processes for military and military spouses in place and meets or exceeds timeframes anticipated in the bill.	06/01: No further action allowed.			licensing - reciprocity and endorsement



Bill	Updated Text	Requester	Title	Comments	Status	First House Vote	Second House Vote	Categories
<a href="#">AB439</a>		Legislative Committee on Senior Citizens, Veterans and Adults with Special Needs	requiring a regulatory body to issue a license by endorsement to certain persons affiliated with the Armed Forces ; requiring a regulatory body to collect certain data concerning applicants ; requiring a regulatory body to issue a license by endorsement to engage in certain health-related professions to a person who meets certain requirements	Similar to SB402	03/31: A. Com (No action)			Licensure; Military licensure by endorsement
<a href="#">SB184</a>	<a href="#">As Enrolled</a>	Sen. Hardy	AN ACT relating to professions; authorizing the Board of Medical Examiners and the State Board of Osteopathic Medicine to issue a license to practice medicine or a license to practice osteopathic medicine, respectively, to certain persons; various authorizations to physician assistants (with / without supervision)	Physician Assistants do not have to maintain (equivalent of) C's as continuing Ed requirement. (relevant change to statute); also, enables PA to be licensed by both medical boards more efficiently.	05/27: Approved by the Governor.	Y: 21 N: 0	Y: 36 N: 5 A: 1	licensure; practice act changes



Bill	Updated Text	Requester	Title	Comments	Status	First House Vote	Second House Vote	Categories
<a href="#">AB73</a>	<a href="#">As Enrolled</a>		relating to the licensing and regulation of the practice of dietetics by the State Board of Health. (Chapter 640E of NRS) Section 1.5 of this bill replaces those existing requirements for an application for such a license with a requirement that an applicant provide evidence that the applicant is a registered dietitian in good standing with the Commission on Dietetic Registration, or its successor organization. (NRS 640E.080) . Section 3 of this bill replaces the qualifications for the issuance of a provisional license with the qualification that an applicant must be eligible to take, but have not successfully completed, the Registration Examination for Dietitians administered by the Commission on Dietetic Registration, or its successor organization. Section 4 of this bill removes a requirement in existing law that a licensed dietitian who fails to submit an application for the renewal of his or her license within 2 years after the date of the expiration of the license must take the Registration Examination for	Contains adjustments to practice rules relative to the national exam; requires good standing in natl organization for licensure as dietician; a lot of changes related to access to provisional license; may be useful to review if Speech Hearing Board seeks to license Assistants	05/25: Approved by the Governor.	Y: 42 N: 0	Y: 21 N: 0	licensure ; requirements
<a href="#">AB330</a>	<a href="#">As Enrolled</a>	Assm. Ellison	AN ACT relating to professions; providing for equivalent credit towards requirements for professional and occupational licenses and certifications for certain occupational, vocational and technical training	allows for training programs for occupational, vocational, career, trade or technical education approved by the State Board of Education to be considered for licensure. Does HAS have any such technical/ certificated education that could be applied to licensure requirements? If so, the Board will have to adopt regs associated with accepting those credits.	06/04: Approved by the Governor.	Y: 42 N: 0	Y: 21 N: 0	licensure; education requirements

Bill	Updated Text	Requester	Title	Comments	Status	First House Vote	Second House Vote	Categories
<a href="#">AB210</a>	<a href="#">As Enrolled</a>	Assm. Yeager	AN ACT relating to chiropractic; requiring a business entity that provides chiropractic services to register with the Chiropractic Physicians' Board of Nevada;; revising certain qualifications of an applicant for a license to engage in the practice of chiropractic; authorizing a chiropractic physician to recommend, dispense or administer certain drugs and devices; creating a privilege for confidential communication between a patient and a chiropractic physician;	Recognizes the situation that chiropractors/ chiropractic assistants (licensed professionals) can be employed by business entities, not self-employed. Makes certain other changes to the practice act.	05/27: Approved by the Governor.	Y: 34 N: 6 E: 2	Y: 20 N: 0 E: 1	licensure; practice act changes
<a href="#">AB173</a>	<a href="#">As Enrolled</a>	Assm. Jauregui	AN ACT relating to professional regulation; revising provisions relating to the exemption from licensure as a professional engineer for employees of certain public utility companies; revising provisions relating to eligibility to take certain required examinations for licensure as a professional land surveyor	Similar to discussions about the requirements for licensure (by DOE and Speech Hearing, or not) for School-based SLPs, this bill removes the requirement for licensure by Board of Professional Engineers for PEs employed by public utilities.	05/25: Approved by the Governor.	Y: 40 N: 0 E: 2	Y: 21 N: 0	licensure; exemption
<a href="#">SB291</a>	<a href="#">As Enrolled</a>	Sen. Lange	AN ACT relating to cosmetology; providing for the licensure and regulation of master estheticians and instructors of master estheticians by the State Board of Cosmetology; setting forth certain requirements for licensure as a master esthetician or instructor of master estheticians; requiring the Board to prescribe a curriculum for a course of study in master esthetics;	A useful bill (and process road it traveled) to review if Speech Hearing Board moves forward with new licenses; lots of amending occurs, driven by multiple parties	06/04: Approved by the Governor.	Y: 16 N: 5	Y: 29 N: 13	licensure; new license bill

Bill	Updated Text	Requester	Title	Comments	Status	First House Vote	Second House Vote	Categories
<a href="#">AB391</a>	<a href="#">2nd Reprint</a>	Assm. Anderson	AN ACT relating to dispensing opticians; authorizing the Board of Dispensing Opticians to employ an Executive Director; providing immunity from civil liability to the Board and any of its members, staff and employees for certain acts; certain duties relating to the issuance, renewal, reinstatement, revocation and suspension of licenses; prescribing requirements for the submission of an application for licensure; prescribing criteria for eligibility for a license as an apprentice dispensing optician; removing the authority of the Board to issue a special license as a dispensing optician; increasing the amount of the administrative fine for engaging in certain activity without holding a license	This Bill passed both houses by wide margins, but received an amendment in the Senate that either was not acceptable to the sponsor (requestor), or did not go far enough for the sponsor's (requestor's) 'perfect world'; sponsor then refused to concur in the amendment, but the bill was not important enough (to leadership) to get a conference committee to reach sponsor's/requestor's further goal via additional amendment, and the bill failed.	06/01: Failed due to lack of Assembly concurrence.	Y: 33 N: 9	Y: 21 N: 0	licensure; practice act
<a href="#">AB401</a>	<a href="#">1st Reprint</a>	Assm. Committee on Judiciary	AN ACT relating to criminal justice; requiring the Advisory Commission on the Administration of Justice to appoint a subcommittee to conduct an interim study concerning the sealing or expungement of records of criminal history	has been discussion in this bill and others about degree to which criminal history of licensee applicants can be examined via background checks and other means; ultimately, licensing boards have been able to support the background checks they utilize	06/01: No further action allowed.			licensure; criminal background checks
<a href="#">SB100</a>	<a href="#">1st Reprint</a>	Sen. Seevers Gansert	AN ACT relating to physical therapy; enacting and entering into the Physical Therapy Licensure Compact	from Alex, as to why this made it through Senate then died: a) Maggie Carleton (who is termed out) hates compacts; b) Heidi Gansert bill; c) the Trial Lawyers put in an amendment in Senate Commerce which would have rendered the compact moot in terms of liability protection. Signal that it was not popular, sent to Senate Finance despite a zero fiscal note from the PT Board and absolutely no impact on the state budget.	06/01: No further action allowed.	Y: 21 N: 0		licensure; Interstate compact bill
<a href="#">SB178</a>		Sen. Buck (Joint: Sen. Hardy, Assm. O'Neill)	AN ACT relating to cosmetology; revising provisions relating to the practice of shampoo technology; revising the training requirements for shampoo technologists	03/12 - AT: No impact to Speech. Monitor for practice act/licensee discussion.	Pursuant to Joint Standing Rule No. 14.3.1, no further action allowed			licensure; practice act

Bill	Updated Text	Requester	Title	Comments	Status	First House Vote	Second House Vote	Categories
<a href="#">SB271</a>		Sen. Hammond	AN ACT relating to midwives; establishing and prescribing the duties of the Board of Certified Professional Midwives; providing for the licensure of midwives and the issuance of permits to apprentice midwives;		Pursuant to Joint Standing Rule No. 14.3.1, no further action allowed	Never got a hearing		Licensure; Profession Regulation
<a href="#">SB005</a>	<a href="#">As Enrolled</a>	Patient Protection Commission	AN ACT relating to health care; requiring the Department of Health and Human Services to establish, if funds are available, an electronic tool to analyze certain data concerning access to telehealth; requiring certain entities to review access to services provided through telehealth and evaluate policies to make such access more equitable; requires payment parity for insurance coverage of telehealth services for a time period one year past the ending of covid emergency, after such time , must provide coverage for services via telehealth but not required to pay at same rate as in person.	clarifes term includes telephone; State Board of Health to create regs regarding establishing provider-client relationship via telehealth. amendments: data dashboard on telehealth only to extent funds available; industrial insurers exempt from paying for services via telephone (audio-only); may reimburse at a lower rate for 'audio-only' (telephone) delivered service; from one year after end of COVID emergency, must provide coverage for services via telehealth but not required to pay at same rate as in person.	06/04: Approved by the Governor.	Y: 21 N: 0	Y: 40 N: 2	health care access - telehealth
<a href="#">SB326</a>		Sen. Hardy	AN ACT relating to professions; authorizing a provider of health care who is licensed or certified in another state to register to use telehealth to provide services to patients located in this State; requiring the Board of Medical Examiners and the State Board of Osteopathic Medicine to prescribe electronic application forms and report certain information to the Legislature; requiring the Commissioner of Insurance to prescribe a form on which a physician may apply to be included in the network of providers of any health carrier who provides coverage to residents of this State	Intent was to allow providers licensed in another state to register with NV licensing board and provide services via telehealth. Received a Do Pass from Senate Health and Human Services but never voted upon by full Senate	06/01: No further action allowed.			health care access - telehealth
<a href="#">SB309</a>	<a href="#">As Enrolled</a>	Sen. Neal	AN ACT relating to Medicaid; establishing a reinvestment advisory committee in certain larger counties; requiring a reinvestment advisory committee to perform certain duties relating to the reinvestment of funds by managed care organizations that provide health care services to recipients of Medicaid	Intent of the bill is to review profits of Medicaid Managed Care Organizations	05/30: Approved by the Governor.	Y: 12 N: 9	Y: 26 N: 15	Medicaid

Bill	Updated Text	Requester	Title	Comments	Status	First House Vote	Second House Vote	Categories
<a href="#">AB347</a>	<a href="#">1st Reprint</a>	Assm. Orentlicher	authorizing the Division of Health Care Financing and Policy of the Department of Health and Human Services to impose an assessment on certain health care providers; prescribing the authorized uses of the revenue generated by such an assessment; ; establishing procedures for fixing the rates charged by certain hospitals, independent centers for emergency medical care, surgical centers for ambulatory patients and physicians for certain services;	Originally proposed that classes of Medicaid providers impose a self-tax as a way to raise medicaid rate concept; Amended to propose a study on economics of health care	06/01: No further action allowed.			Medicaid
<a href="#">AB372</a>		Assm. Kasama	AN ACT relating to health care; establishing the Doctors of Nevada Program to reimburse the educational debt of physicians who practice in this State and to provide stipends to resident physicians who commit to practicing in this State; requiring the imposition of an assessment on each county in this State to pay a portion of the costs of the program;		06/01: No further action allowed.			provider (physician) recruitment
<a href="#">SB233</a>	<a href="#">As Enrolled</a>	Sen. Hardy	AN ACT making an appropriation for allocation to the Nevada Health Service Corps to obtain matching federal money for the purpose of encouraging certain medical and dental practitioners to practice in underserved areas	EXEMPT Fiscal Note: State	06/04: Approved by the Governor.	Y: 19 N: 0 E: 2	Y: 42 N: 0	provider (physician) recruitment
<a href="#">AB351</a>		Assm. Flores	AN ACT relating to public health; revising provisions concerning medical certificates of death relating to a person who self-administers a medication that is designed to end his or her life; authorizing a physician to prescribe a medication that is designed to end the life of a patient under certain circumstances;		06/01: No further action allowed.			Regulation of physicians; Death with Dignity
<a href="#">SB329</a>	<a href="#">As Enrolled</a>	Sen. Lange	AN ACT relating to health care; requiring a hospital or physician group practice to notify the Department of Health and Human Services of certain transactions; prohibiting an insurer, a physician or a health care facility from entering into a contract that contains certain provisions; authorizing the imposition of certain administrative sanctions	Bill intent is to create oversight of health provider ownership /purchase /contracting arrangements	06/08: Approved by the Governor.	Y: 12 N: 9	Y: 26 N: 15 A: 1	Regulation of Physicians



State of Nevada

Speech-Language Pathology, Audiology &amp; Hearing Aid Dispensing Board

## AGENDA ITEM 6

### Review and Approval of FY 2022 Proposed Budget

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Per the prior agenda item, several pieces of legislation were not passed in the 2021 session that would have significantly impacted future operating costs. As such, the FY22 proposed budget is presented for review and approval.

A review of the final FY21 balance sheet will be addressed in a later agenda item, however it is a pleasure to report that FY21 expenses totaled less than estimated at \$169,829.58, and revenue totaled more than estimated, at \$183,137.52, **resulting in a net surplus of \$13,307.94 for FY21**. This has increased our reserve balance to \$75,248.49, an increase of \$14,622.91 from the end of FY20.

FY17-21 revenue trends show an average 7% increase in revenue each year, though FY21 was unusual, ending in an 11% increase compared to 7% or less in prior years. As a result, and given that we are able to keep costs low, we are conservatively projecting a 5% revenue increase for FY22 and hoping for a significant surplus to put towards reserves:

- **Total Revenue:** **\$ 192,295**
- **Total Expenses:** **\$ 151,790**
- **Revenue in Excess of Operating Expense:** **\$ 40,505**

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**ACTION:** Take action, table the matter, or take no action on the request.

**ATTACHMENT(S):**

1. *FY22 Proposed Budget*

**State of Nevada**  
**Speech-Language Pathology, Audiology and Hearing Aid Dispensing Board**  
**PROPOSED FISCAL YEAR 2022 BUDGET**

REVENUE			Revenue Narrative
<b>Fees</b>	New applications & late renewals	\$ 31,028.00	~ 5% increase from FY21 (\$29,550)
<b>License Fees</b>	New, renewals, reinstatements, & conversions	\$ 152,496.00	~ 5% increase from FY21 (\$145,234)
<b>Exams, List and Interest</b>	Exams, mailing lists, verifications, bank interest	\$ 8,771.00	~ 5% increase from FY21 (\$8,353)
<b>Total Revenue</b>		<b>\$ 192,295.00</b>	
EXPENSES			Expense Narrative
<b>Personnel/Payroll</b>		\$ 114,000.00	
	Executive Director	\$ 60,775.00	Annual \$60,775. No FY22 increase.
	Licensing Coordinator	\$ 32,760.00	Annual \$32,760. No FY22 increase. 25% increase 7/2019.
	Investigator	\$ 2,000.00	Hourly at \$30/hour not to exceed \$2,000.
	Payroll Taxes	\$ 7,308.00	FICA @ \$5,923; Medi @ \$1,385
	Deferred Compensation	\$ 5,500.00	Executive Director @ 9.05%
	Direct Deposit Fees	\$ 133.00	\$1.75 per DD (JP/SW @ 52 = \$91; WS @ 24 = \$42)
<b>Legal Fees</b>	Attorney General	\$ 8,000.00	\$154.36/hr: 6 Mtgs @ 2 hrs ea= \$1,852 + \$4k complaints
<b>Bank Fees</b>	Merchant Services/Checking	\$ 4,000.00	\$1000 increased from FY21 - FY21 Q3 is almost \$3200
<b>Board Compensation</b>	Salary	\$ 2,700.00	6 ZOOM meetings/hearings @ max \$75 x 6 members
<b>Dues</b>	NCSB; RAN	\$ 700.00	NCSB \$450; RAN \$100
<b>Equipment</b>		\$ 200.00	No equipment anticipated.
<b>Examinations</b>		\$ 3,630.00	
	Exam Proctors	\$ 2,400.00	24 exams @ \$100/proctor
	Exam Materials	\$ 1,230.00	24 booklets @ \$50 each + \$28.90 shipping
<b>Insurance</b>	Tort & Liab/Worker's Comp	\$ 1,250.00	Tort Liability \$750; Worker's Comp \$500
<b>Lic Database/Website</b>	Albertson Consulting	\$ 7,650.00	Annual \$7,200; Support Overage \$405 (3 hrs @ \$135/hr)
<b>Meeting Expense</b>	Rooms/lunches	\$ 100.00	Recommend no in-person meetings.
<b>Office Lease &amp; Cost Share</b>	OT Board	\$ 3,360.00	Shared office, supplies, equipment, & internet.
<b>Office Supplies/Storage</b>	ZOOM, Office 365, VRC, Staples, Various	\$ 1,300.00	ZOOM: \$150; Office365: \$400; Storage: \$540; Misc: \$200
<b>Postage</b>	USPS	\$ 400.00	Three year average less \$300 for closure of PO Box.
<b>Printing</b>	State Printer	\$ 200.00	Envelopes, misc.
<b>Professional Fees</b>		\$ 3,500.00	
	Accounting	\$ 3,000.00	\$750/quarter.
	Legislative Services	\$ -	No lobbying services.
	IT Technical Support	\$ 500.00	None used through FY 21 Q3.
<b>Telephone/Technology</b>	AT&T	\$ 600.00	Local \$300 (\$25/mo). LD \$25 (\$2/month). Telecon \$200.
<b>Travel</b>		\$ 200.00	
	Travel - In State	\$ 200.00	Local mileage. Reduce & hold all meetings via ZOOM.
	Travel - Out of State	\$ -	Conference travel. Recommend no NCSB travel this year.
<b>Total Operating Expenses</b>		<b>\$ 151,790.00</b>	
<b>Revenue in Excess of Operating Expense</b>		<b>\$ 40,505.00</b>	



State of Nevada

Speech-Language Pathology, Audiology &amp; Hearing Aid Dispensing Board

## AGENDA ITEM 7

### Discussion and Position on NSHA Request to Consider Board NRS/NAC Revision to Address Telehealth/Telesupervision and Medicaid “Under the Direction Of” Supervision

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At the Board’s April 2021 meeting, an update was provided on an issue related to Medicaid and SLPs providing telehealth services. Per NSHA, Medicaid is indicating that services provided via telehealth and requiring supervision to Bachelor level or Provisional SLPs are not reimbursable as there is no authority in NRS or NAC for telesupervision. It was reiterated that our Board does not regulate supervision or billing and cannot waive current NRS or NAC, as all changes must follow the legislative or administrative rulemaking process. Our NRS allows for telehealth by our licensed Audiologists and SLPs.

Kim Reddig further reported that this issue will likely propel the work NSHA is taking on with the Nevada Department of Education to sunset bachelor’s level SLPs in school settings and raise the minimum educational requirements to a master’s degree.

No action was taken.

The Board has not been contacted by Nevada Medicaid, the Nevada Department of Education, or Washoe County School District to date, but has been contacted by Clark County School District, and a formal request was received from NSHA to consider waiving or revising NRS 637B/NAC 637B language to address telesupervision and “under the direction of” billing.

**A thorough review of this issue supports that this request is not within the Board’s purview.** It is recommended that the Board review and approve the attached drafted position statement as a formal response to this request.

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**ACTION:** Take action, table the matter, or take no action.

#### **ATTACHMENT(S):**

1. *Board Position DRAFT 7 21 2021*





State of Nevada

**Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board****BOARD POSITION STATEMENT ON TELEHEALTH/TELESUPERVISION  
AND MEDICAID "UNDER THE DIRECTION OF" SUPERVISION (DRAFT 7/21/2021)****BACKGROUND**

Nevada Medicaid has notified school districts and private providers that services provided via telehealth and requiring supervision of bachelor's level SLPs or Clinical Fellows (CFY) are not reimbursable as there is no authority in NRS or NAC for telesupervision "under the direction of" a licensed SLP. This matter also extends to other professions employed by school districts and is likely to result in significant revenue losses. It has also been reported that SLPs holding a Board license and providing supervision in educational settings are concerned that their Board licenses may be at risk if they sign off on services provided through telesupervision.

This Board has not been contacted by Nevada Medicaid to date but has received requests from NSHA and Clark County School District to consider waiving or revising NRS/NAC language to address telesupervision and "under the direction of" billing. NSHA issued a position statement in April 2021 to request an emergency directive from Governor Sisolak to allow telesupervision. ASHA guidance, issued in February 2021 and in effect until December 31, 2021, allows for telepractice with telesupervision of graduate students and Clinical Fellows (CFY) within [specific guidelines allowed by the Council for Clinical Certification in Audiology and Speech-Language Pathology \(CFCC\)](#).

Authority for bachelor's level SLP personnel to practice in a public educational setting is outlined in NAC 391.370, which allows an individual who has earned a bachelor's degree to receive an endorsement to teach students in public educational settings with speech and language impairments. The state of Nevada is unique in that it is the only state that allows this endorsement, which is not considered a best practice in the field. At the Board's January 2021 meeting, Kim Reddig, NSHA President, shared for the record that NSHA and the NV Coalition to Address Personnel Shortages in Special Education and Related Services are actively partnering with NDE Licensing to sunset the NDE bachelor's level SLP license/endorsement, which includes a five-year plan to begin requiring a master's degree for all newly licensed SLPs. They predict a steady pipeline of master's level SLPs from Nevada State College and UNR and expect that bachelor's level practitioners will be grandfathered in, as allowed by the NAC, unless they let their license lapse, but any new applicant would have to meet the new requirement.

**POSITION STATEMENT**

- *In consultation with Board Counsel, it is not the role of this Board to address authority for telesupervision, Medicaid billing, or work performed by SLP personnel employed by public educational institutions. Rather, as the issue relates specifically to billing by SLP personnel employed by public educational institutions in Nevada, it is an issue for those entities to address.*
- *It is the position of the Board that its current NRS and NAC are sufficient to allow continued practice by its licensed Speech-Language Pathologists.*
- *The Board agrees with NSHA's effort to work with NDE and move toward sunsetting the use of bachelor's level practitioners in public education to align with ASHA and the Board's licensure requirements and has determined it would be inappropriate to consider revisions to its practice law/regulations to include these practitioners.*

The Board does not intend to take action to address this issue, but would like to clarify its role and provide education regarding the rules that must be followed to consider law/regulation changes:

- The Board is established under the provisions of [NRS Chapter 637B](#) **to protect the public health, safety and welfare** by ensuring that only competent persons practice speech-language pathology, audiology and hearing aid dispensing in the State.
- The Board, as a public body, **cannot waive any requirement** in its NRS or NAC.
- NRS (Nevada Revised Statutes) are state laws and **may only be changed through legislation passed during a biennial state legislative session**.
- NAC (Nevada Administrative Code) are state regulations and **may only be changed if 1) authority already exists in the Board's NRS for the regulation, and 2) the Board pursues changes in adherence with the administrative rulemaking process** outlined in the Nevada Administrative Procedure Act (NRS Chapter 233B) during a legislative interim.

## Rationale

### 1. SLP DEFINED

The Board's practice law/regulations define a Speech-Language Pathologist as *"any person who is licensed to engage in the practice of speech-language pathology pursuant to the provisions of this chapter."* (NRS 637B.070).

An applicant for a Standard SLP license must: 1) satisfy the academic requirements of a [graduate educational program accredited by the American Speech-Language-Hearing Association](#) (ASHA) or its successor organization approved by the Board OR proof that education from a foreign school is substantially equivalent. ASHA's [certification standards](#) require a master's, doctoral, or other recognized post-baccalaureate degree (NRS 637B.196); and 2) hold a current Certificate of Clinical Competence (CCC) issued by ASHA or its successor organization approved by the Board (NRS 637B.197). An applicant who has completed the education in (1) above, but is completing the clinical fellowship requirements for obtaining the CCC issued by ASHA is eligible to apply for a [Provisional SLP license](#) (NRS 637B.197; [NRS 637B.201\(1\)\(a\)](#)).

It is the position of the Board that its NRS/NAC requirements for SLP licensing are sufficient.

### 2. NO BOARD AUTHORITY FOR BACHELOR'S LEVEL SLP

The Board's practice law/regulations do not sanction or provide a licensing path for any Speech-Language Pathology practitioner not holding at least a master's degree from an acceptable educational program.

Authority for a bachelor's level practitioner employed by a public educational institution is provided in [NAC 391.370](#) and resides with the Nevada Department of Education. In October 2019, the Board began exploring licensing for Speech-Language Pathology Assistants (SLPA) and Audiology Assistants (AUDA), but there is no active effort at this time to pursue either license type, which would require a revision to NRS through legislation. It is the position of the Board that the use of bachelor's level personnel is not a best practice and given Nevada's unique role as the *only state* using bachelor's-level SLP personnel in public educational settings, the Board has considered how SLPA licensing would dovetail with efforts to sunset the use of these practitioners. In April 2021, the matter was tabled by the Board as it awaits the results of collaboration efforts between NSHA and NDE.

It is the position of the Board that its current NRS/NAC requirements for SLP licensing are sufficient and are not applicable to NDE employees. Any change made to endorsements, billing, or supervision of or by SLPs in public educational settings in Nevada would be more appropriate to NAC 391 (or related NRS/NAC) or NDE policies.

### 3. NO BOARD AUTHORITY OVER SLP EMPLOYED BY A PUBLIC EDUCATIONAL INSTITUTION

An SLP employed by a public educational institution AND holding a license issued by this Board is only subject to this Board's practice laws and regulations with respect to any private practice/contract work they engage in.

Per [NRS 637B.080 \(1\)](#): *"The provisions of this chapter do not apply to any person who holds a current credential issued by the Department of Education pursuant to chapter 391 of NRS and any regulations adopted pursuant thereto and engages in the practice of audiology or speech-language pathology within the scope of that credential."* This was further clarified in a revision to NAC 637B Regulation R095-19 adopted in June 2020 which has not yet been codified, but states: *1. Except as otherwise provided in subsection 2, for the purposes of subsection 1 of NRS 637B.080, the provisions of chapter 637B of NRS do not apply to a person who holds a current credential issued by the Department of Education pursuant to chapter 391 of NRS and any regulations adopted pursuant thereto who engages in the practice of audiology or speech-language pathology, as applicable, within the scope of that credential if the person: (a) Holds an active teacher's license issued pursuant to chapter 391 of NRS and an endorsement to teach pupils who have hearing impairments or to teach pupils who have speech and language impairments; (b) Is employed by a public educational institution; and (c) Does not engage in the practice of audiology or speech-language pathology as an independent contractor or provide services in the private practice of audiology or speech-language pathology. 2. If a person who holds a current credential issued by the Department of Education pursuant to chapter 391 of NRS and any regulations adopted pursuant thereto also holds a valid license to engage in the practice of audiology or the practice of speech-language pathology pursuant to the provisions of chapter 637B of NRS and any regulations adopted pursuant thereto, such a person is subject to the provisions of chapter 637B of NRS and any regulations adopted pursuant thereto to the extent that he or she engages in the practice of audiology or speech-language pathology as an independent contractor or provides services in the private practice of audiology or speech-language pathology.*

Based on the citation above, this Board DOES NOT HAVE:

- (1) Authority to dictate SLP practice/supervision in a public educational institution; and
- (2) Grounds for initiating disciplinary action against a Board licensee in relation to their practice as an employee of a public educational institution.

It is the position of the Board that this regulation is sufficient.

### 4. NO AUTHORITY TO ADDRESS SUPERVISION/TELESUPERVISION OF OTHERS

The Board's practice law/regulations do not address supervision/telesupervision of any licensed Speech-Language Pathology practitioner, clinical fellow, or graduate student intern.

A Standard SLP licensee does not require supervision. A Provisional SLP licensee is given three (3) years to earn ASHA's Certificate of Clinical Competence (CCC) and apply for conversion to a Standard SLP license. The Board's practice law only requires proof of the CCC and does not address the manner in which the Provisional SLP is supervised to earn it, which is prescribed by ASHA. Graduate intern supervision is addressed by ASHA and/or the Council on Academic Accreditation. ASHA's [Council for Clinical Certification in Audiology and Speech-Language Pathology \(CFCC\)](#) has given specific guidance and allowance for telesupervision (for training purposes) for graduate students and Clinical Fellows (CFY/Provisional Licensee).

As there is no authority in NRS, no change could be made to NAC without legislation – which could not be initiated until at least the 2023 legislative session and would require extensive resources with no guarantee of passage. The Board does not see a need to take on this authority.

#### 5. NO AUTHORITY TO ADDRESS SUPERVISION/TELESUPERVISION PROVIDED BY LICENSEES

The Board's practice law/regulations only address supervision provided by a licensee in the context of professional responsibility and scope of practice, but again, would not apply to an SLP employed by and directed by a public educational institution.

Per [NAC 637B.042\(14\)](#): *"A licensee shall not authorize a person under the supervision of the licensee to perform services that are outside of the scope of the license, certificate, training or experience of the person performing the services, or allow such a person to hold himself or herself out as having expertise in a field or activity in which that person is not qualified."*

As the Board does not license or regulate supervision of lower-level practitioners/students, it is the position of the Board that this regulation is sufficient. As stated earlier, a Board licensee acting under the direction of their employment in a public educational institution would not be subject to NRS 637B or NAC 637B.

#### 6. TELEHEALTH ALREADY AUTHORIZED

The Board's practice law allows for telehealth by our licensed Audiologists and SLPs and there is no reference in NRS or NAC that specifically allows or prohibits telesupervision, as our licensees do not require supervision.

Per [NRS 637B.244](#): *Telepractice: Requirements for practice: (1) A person who engages in the practice of audiology or speech-language pathology by telepractice within this State and is a resident of this State or provides services by telepractice to any person in this State must (a) Hold a license to engage in the practice of audiology or speech-language pathology, as applicable, in this State.* The NRS does not differentiate between the SLP Standard or Provisional license.

As there is no authority in NRS, no change could be made to NAC without legislation. It is the position of the Board that this regulation is sufficient as our licensees do not require supervision.

#### 7. NO AUTHORITY TO REGULATE BILLING

**The Board's practice law/regulations do not regulate billing, claims, or reimbursement.**

"Under the Direction Of" (UTDO) Supervision (specific for Medicaid billing) is addressed in Medicaid Service Manual (MSM) 2800 and in ASHA's *Medicaid Guidance for School-Based SLP Services Addressing the UTDO*. Both ASHA and MSM defer to state regulations and guidance regarding telepractice and telesupervision for each professional domain. It should also be noted that a legal review of the laws and regulations that apply to other Nevada Boards whose licensees may bill Medicaid indicates that *none* address Medicaid billing.

As there is no authority in NRS, no change could be made to NAC without legislation, and the Board does not see a need to take on this authority.



State of Nevada

Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board

## AGENDA ITEM 8

### Work Session on Future Legislative Efforts to Consider Licensing Speech-Language Pathology Assistants

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At the Board's January 20, 2021 meeting it was decided that this matter would be included as a standing agenda item in future meetings but tabled for the foreseeable future, based on concurrent work between NSHA and the Nevada Department of Education to "sunset" Bachelor's level SLP providers in school settings.

Kim Reddig and Nancy Kuhles of NSHA/NV Coalition have been invited to update the Board on this initiative.

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**ACTION:** Take action, table the matter, or take no action.

**ATTACHMENT(S):** None.



State of Nevada

Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board

## AGENDA ITEM 9

### Work Session on Future Legislative Efforts to Consider Licensing Audiology Assistants

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At the Board's April 21, 2021 meeting it was decided that this matter would be included as a standing agenda item in future meetings but tabled for the foreseeable future, with potential legislative efforts on this issue aligned with consideration for licensing SLP Assistants.

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**ACTION:** Take action, table the matter, or take no action.

**ATTACHMENT(S):** None.



State of Nevada

Speech-Language Pathology, Audiology &amp; Hearing Aid Dispensing Board

## AGENDA ITEM 10

### Work Session to Consider Current and Potential Revisions to Licensee Continuing Education Requirements

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At the Board's January 2021 meeting, a question came up around continuing education requirements during discussion around implementation of a Jurisprudence Exam, and a suggestion was made for the Board to review its requirements and compare to other states in a future meeting. The following is presented for the Board's consideration:

#### Current Nevada Requirements

- The Board's NAC (637B.400-430) outlines continuing education requirements for all licensees. In summary, all licensees must complete at least fifteen (15) hours of continuing education (CE) annually based on the license expiration date and must directly pertain to the profession in which the individual holds a license issued by the Board. Excess hours may not be carried over. The Board accepts most standard CE activities, including online courses.
- There are no requirements in our NAC for hours specific to ethics or other topics, however Dispensing Audiologists must complete at least five (5) of the required (15) hours related to the practice of fitting and dispensing hearing aids.
- A new graduate exemption is provided to licensees renewing for the first time within twelve (12) months after graduation.

#### Related National Certification Requirements

- [ASHA Certification Maintenance Standards](#) require 30 hours every 3 years, equaling 10 hours annually. This pertains to any SLP or Audiologist holding the ASHA Certificate of Clinical Competence (CCC), though our Board only requires the CCC at the time of initial licensure for a Standard SLP license.
- [NBC-HIS Certification Maintenance Standards](#) require 24 hours every 3 years, equaling 8 hours annually. This pertains to any HAS holding NBC-HIS Certification, though our Board only requires this certification at the time of initial licensure for a Standard or Temporary HAS license.

#### State By State Trends

An analysis of Nevada's requirements compared to national trends reveals that we require more hours than most states for all three licensee categories. Most states require some CE hours for license renewal, though a few don't.

- The national average for ALL states (includes 0 hours) is 11 hours annually for AUD & SLP, and 9 hours annually for HAS.
- The average among only states that require CEs is 12 hours annually for AUD & SLP, and 10 hours annually for HAS.

	SLP	AUD	HAS
STATES REQUIRING <b>MORE THAN</b> 15 HOURS	3	3	1
STATES REQUIRING <b>15 HOURS</b>	10	9	4
STATES REQUIRING <b>LESS THAN</b> 15 HOURS	36	37	39
STATES REQUIRING <b>NO HOURS</b>	2	2	7





## State of Nevada

## Speech-Language Pathology, Audiology &amp; Hearing Aid Dispensing Board

State	SLP	AUD	HAS
Alabama	12	12	10
Alaska	0	0	0
Arizona	10	10	12
Arkansas	10	10	12
California	12	12	12
Colorado	20	20	8
Connecticut	10	10	8
DC	10	10	0
Delaware	15	15	15
Florida	15	15	7
Georgia	10	10	10
Hawaii	0	0	0
Idaho	10	10	10
Illinois	10	10	1
Indiana	18	18	10
Iowa	15	15	16
Kansas	10	10	10
Kentucky	15	15	10
Louisiana	10	10	15
Maine	10	10	10
Maryland	15	15	15
Massachusetts	10	10	10
Michigan	10	10	0
Minnesota	15	15	10
Mississippi	10	10	10
Missouri	15	15	12

State	SLP	AUD	HAS
Montana	10	10	10
Nebraska	10	10	12
Nevada	15	15	15
New Hampshire	15	10	8
New Jersey	10	10	10
New Mexico	10	10	10
New York	10	10	10
North Carolina	10	10	10
North Dakota	10	10	10
Ohio	10	10	10
Oklahoma	10	10	10
Oregon	15	15	12
Pennsylvania	10	10	10
Rhode Island	10	10	0
South Carolina	16	16	8
South Dakota	10	12	12
Tennessee	10	10	10
Texas	10	10	10
Utah	10	10	10
Vermont	10	10	0
Virginia	10	10	0
Washington	10	10	10
West Virginia	10	10	10
Wisconsin	10	10	10
Wyoming	12	12	10
AVERAGE (REQ)	12	12	10
AVERAGE (ALL)	11	11	9

**Possible Action & Recommendation**

The Board may consider initiating a change to NAC 637B to change the current CE requirements. This would require adherence to the Administrative Rulemaking process, which would entail holding at least one Public Workshop and one Public Hearing for licensees, interested parties, and the public to have input on proposed changes. A letter in support of changing (lowering) the Board's CE requirements has been received from a licensee and is attached for the Board's review. **It is recommended that the Board consider lowering the CE requirement to ten (10) hours annually to align with ASHA requirements and national trends.**

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**ACTION:** Take action, table the matter, or take no action.

**ATTACHMENT(S):**

1. CE Letter Parrish



FROM THE DESK OF

## Elizabeth Parish, M.S. CCC-SLP

July 3, 2021

Nevada Speech-Language Pathology,  
Audiology & Hearing Dispensing Board  
6170 Mae Anne Avenue, Suite 1  
Reno, NV 89523

Dear Board of Directors,

I am writing to you to express my displeasure for the state's continuing education requirement of fifteen hours per year. The American Speech and Hearing Association requires thirty hours per three year interval. Nevada's individual requirement represents an additional fifteen hours per interval. This means the state requirement is fifty percent more intensive than our national licensing agency. The standard set by an occupation's national governing body should be respected by states as what is most clinically and professionally appropriate.

Furthermore, I believe this practice is damaging to our state's pool of talent for several reasons. It is unnecessarily demanding, extraneously time intensive, and cost prohibitive. Perhaps the biggest consequence of this regulation is that it dissuades contract Speech-Language Pathologists from providing care to our regions in desperate need of healthcare services. As a former traveling therapist for eight years, I can attest that the state of Nevada has a reputation as an unrealistic place to provide contract work due to the additional five hours of education per year. Our state has a critical shortage of qualified SLP's and any action by the board that makes it harder to find necessary professionals hurts Nevadans directly.

I urge you to reconsider this requirement or allow Nevada licensed SLP's to directly vote on this statute for the good of our profession and the good of our state.

Sincerely,

Elizabeth Parish, M.S. CCC-SLP

Nevada State License: 2597



State of Nevada

Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board

## AGENDA ITEM 11

### Disciplinary Matters: Recommendation for Dismissal - Case No. A21-01

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The Complaint alleged violation of federal and state law and/or regulations relating to the fitting and dispensing of hearing aids, and unprofessional conduct.

After investigation and review of all documentation received on this complaint, it has been determined that there is insufficient evidence to file a formal complaint for hearing before the Board and the facts set forth in the accusations are insufficient to establish a violation of Chapter 637B of the Nevada Revised Statutes or the Nevada Administrative Code.

This case is recommended for dismissal.

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**ACTION:** Take action, table the matter, or take no action on the request.

**ATTACHMENT(S):** None.



State of Nevada

Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board

## AGENDA ITEM 12

### Executive Director's Report

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Please see the Written Executive Director's Report.

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**ACTION:** Take action, table the matter, or take no action.

**ATTACHMENT(S):**

1. *ED Report 7 21 2021*
2. *FY21 Q4 & End of Year Financials*



State of Nevada

**Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board**

6170 Mae Anne Avenue, Suite 1, Reno, NV 89523

(775) 787-3421 / Fax (775) 746-4105

[www.nvspeechhearing.org](http://www.nvspeechhearing.org) Email [board@nvspeechhearing.org](mailto:board@nvspeechhearing.org)

**EXECUTIVE DIRECTOR'S REPORT**

July 21, 2021

**a. Licensure Statistics**

The following chart provides licensing statistics for the period April 1, 2021 through June 30, 2021 with a net increase of 77 licenses, a 5.8% increase. A total of 104 licenses were issued in FY21 Q4, compared to 65 in FY20 Q4, a 60% increase.

The FY21 ending licensee census is 1,400, a significant increase of 11% from our FY20 ending census of 1259 licensees.

Description	Total Licensees	Speech Pathologists	Audiologists	Dispensing Audiologists	Hearing Aid Specialists	Apprentices
<b>Mar 31, 2021</b>	<b>1323</b>	<b>1078</b>	<b>57</b>	<b>93</b>	<b>80</b>	<b>15</b>
Issued	104	95	4	1	2	2
Expired	27	24	0	2	0	1
<b>June 30, 2021</b>	<b>1400</b>	<b>1149</b>	<b>61</b>	<b>92</b>	<b>82</b>	<b>16</b>
Net Change	+ 77	+ 71	+ 4	- 1	+ 2	+ 1
	+ 5.8%	+ 7%	+ 7%	- 1%	+ 3%	+ 7%

**b. Fiscal Year 2021 Financial Report**

The FY2 Q4/End of Year Financial Summary is attached for the Board's Review. We are extremely happy to report that we ended FY21 OVER budget by approximately \$13,000, compared to the initial estimate of a \$28,000+ deficit. This is likely a result of significant cost-savings measures implemented this year, a conservative estimation of revenue when the FY21 budget was developed, and a notable increase in new licenses this year/quarter. This is a particularly encouraging trend given the failure of our fee increase bill in the recent legislative session, and it is anticipated that continued fiscal responsibility can allow the Board to build reserves again.

**Profit and Loss Through Q4 (End of Fiscal Year)**

- Total Revenue: \$183,137.52      Percent of Budget: 117.40%
- Deferred Revenue: \$80,728.22
- Total Expenses: \$169,829.58      Percent of Budget: 92.19%
- **Net Income: \$13,307.94**

**Balance Sheet**

- Total Cash Assets: \$163,469.57
- Total Liabilities: \$93,953.95
- **Total Equity: \$75,248.49**      Increase of \$14,622.91 from the end of FY20

### Deviations from Budget

- Legal/investigative fees were (not unexpectedly) beyond budget at 168.25% given the number of complaints received in FY21 (8) and one (1) prior case that resulted in multiple hearings. This will be adjusted for FY22.
- Membership dues were over budget due to an omission of one membership in development of the FY21 budget, which has been corrected for FY22.
- Personnel costs, licensing program subscription, office supplies, printing, and postage were slightly over budget which will be adjusted for FY22.

### c. Advisory Committee on Fitting and Dispensing Hearing Aids

The Committee has not met since January 2020, partly due to COVID but also as no issues were identified as needing review. We now have a few issues requiring the Committee's attention and a meeting has been scheduled for Wednesday, August 11, 2021. Any recommendations that come out of the Committee will be brought to the Board's October 2021 meeting.

### d. Board Member Appointments/Reappointments

Name	Credential/ Role	Location	Term	Term Expires	Eligible for Reappointment
Tami Brancamp	SLP/Board Chair	Reno	1	7/1/2023	No
Andrea Menicucci	SLP/Board Vice Chair	Reno	2	7/1/2021	Yes
Minnie Foxx	Public Member	Las Vegas	1	7/1/2023	Yes
Michael Hodes	AuD/Board Member	Reno	1	7/1/2023	Yes
Timothy Hunsaker	AuD/Board Member	Las Vegas	1	7/1/2022	Yes
Bonnie Lamping	SLP/Board Member	Las Vegas	2	7/1/2022	No
Thomas Rainford	BC-HIS/Board Member	Las Vegas	2	7/1/2021	No

Andrea Menicucci's first term expired on 7/1/2021 and we have been advised by the Governor's Office that her reappointment application has been received and is pending review.

Thomas Rainford's final term expired on 7/1/2021 and we are awaiting news of a new appointment from the Governor's office. We have been advised that several applications have been received and are pending review.

### e. Advisory Committee Meeting – August 11, 2021 at 4pm

Several items have come up for discussion that are appropriate for the Advisory Committee, such as ear lavage, digital ear scanning, NBC-HIS certification for Apprentices, OTC hearing aids, and cerumen management legislation in other states. We have scheduled a committee meeting for 8/11/2021 and expect to bring any recommendations from the Committee to the October 2021 Board Meeting.

### f. Complaints

As of the April 2021 meeting, there were seven (7) open complaints open for investigation:

- One (1) was presented and approved for dismissal at the 4/21/2021 meeting = 6 total cases
- Three (3) were closed without opening a formal investigation = 3 total cases
- Two (2) additional complaints were received in June 2021 = 5 total cases
- One (1) June complaint was closed without opening a formal investigation = 4 total cases
- One (1) case has been presented at this meeting for dismissal = 3 total cases

Following this meeting, it is anticipated there will be three (3) open complaint cases in the investigative process.

**Profit Loss Budget vs. Actual**  
**July 2020 through June 2021**

	<b>Annual Budget</b>	<b>Actuals July 20 - June 21</b>	<b>Remaining Balance</b>	<b>% of Budget Spent</b>
<b>Ordinary Income/Expense</b>				
<b>Income</b>				
<b>Fees</b>	25,000.00	29,550.00	-4,550.00	118.20%
<b>License Fees</b>	125,000.00	145,234.03	-20,234.03	116.19%
<b>Exams, List and Interest</b>	6,000.00	8,353.49	-2,353.49	139.23%
<b>Total Income</b>	<b>156,000.00</b>	<b>183,137.52</b>	<b>-27,137.52</b>	<b>117.40%</b>
<b>Expense</b>				
<b>Personnel Cost</b>	108,343.38	112,516.93	-4,173.55	103.85%
<b>Attorney General / Legal Fees</b>	5,000.00	8,412.71	-3,412.71	168.25%
<b>Audit Fees</b>	0.00	0.00	0.00	0.00%
<b>Bank Service Charges</b>	3,000.00	3,968.42	-968.42	132.28%
<b>Board Compensation</b>	3,150.00	2,250.00	900.00	71.43%
<b>Dues</b>	450.00	699.90	-249.90	155.53%
<b>Equipment Purchase</b>	500.00	0.00	500.00	0.00%
<b>Examinations</b>	4,128.90	2,902.73	1,226.17	70.30%
<b>Insurance</b>	1,600.00	1,205.21	394.79	75.33%
<b>Licensing Program Subscription</b>	13,800.00	14,235.00	-435.00	103.15%
<b>Meeting Expenses</b>	300.00	0.00	300.00	0.00%
<b>Office Lease</b>	8,450.29	5,030.80	3,419.49	59.53%
<b>Office Supplies</b>	700.00	990.10	-290.10	141.44%
<b>Postage</b>	300.00	384.83	-84.83	128.28%
<b>Printing</b>	100.00	183.36	-83.36	183.36%
<b>Professional Fees</b>				
<b>Legislative Services</b>	29,000.00	13,500.00	15,500.00	46.55%
<b>Accounting</b>	3,000.00	3,000.00	0.00	100.00%
<b>IT / Technical Support</b>	1,000.00	0.00	1,000.00	0.00%
<b>Total Professional Fees</b>	<b>33,000.00</b>	<b>16,500.00</b>	<b>16,500.00</b>	<b>50.00%</b>
<b>Telephone</b>	1,200.00	549.59	650.41	45.80%
<b>Travel</b>				
<b>In-state Travel</b>	200.00	0.00	200.00	0.00%
<b>Out of State Travel</b>	0.00	0.00	0.00	0.00%
<b>Total Travel</b>	<b>200.00</b>	<b>0.00</b>	<b>200.00</b>	<b>0.00%</b>
<b>Total Expense</b>	<b>184,222.57</b>	<b>169,829.58</b>	<b>14,392.99</b>	<b>92.19%</b>
<b>Net Ordinary Income</b>	<b>-28,222.57</b>	<b>13,307.94</b>	<b>-41,530.51</b>	<b>-47.15%</b>
<b>Net Income</b>	<b>-28,222.57</b>	<b>13,307.94</b>	<b>-41,530.51</b>	<b>-47.15%</b>

**Balance Sheet**  
**As of June 30, 2021**

	<u>June 30, 21</u>
<b>ASSETS</b>	
<b>Current Assets</b>	
Checking/Savings	
Wells Fargo Bank - Checking	60,617.13
Wells Fargo Bank - Savings	<u>102,852.44</u>
Total Checking/Savings	163,469.57
<b>Total Current Assets</b>	
Other Current Assets	<u>2,400.00</u>
Prepaid Expenses	<u>2,400.00</u>
Total Other Current Assets	165,869.57
<b>Fixed Assets</b>	
Capital Assets	<u>4,150.97</u>
Total Fixed Assets	<u>4,150.97</u>
<b>TOTAL ASSETS</b>	<u><u>170,020.54</u></u>
<b>LIABILITIES &amp; EQUITY</b>	
<b>Liabilities</b>	
<b>Current Liabilities</b>	
Accounts Payable	
Accounts Payable	<u>818.10</u>
Total Accounts Payable	818.10
Other Current Liabilities	
Deferred Revenue	80,728.22
Paid Time Off	10,129.00
Payroll Liabilities	2,878.00
Payroll Tax Liability	<u>218.73</u>
Total Other Current Liabilities	<u>93,953.95</u>
Total Current Liabilities	<u>93,953.95</u>
Total Liabilities	94,772.05
<b>Equity</b>	
Invested in Capital Assets	4,150.97
Retained Earnings	57,789.58
Net Income	<u>13,307.94</u>
Total Equity	<u>75,248.49</u>
<b>TOTAL LIABILITIES &amp; EQUITY</b>	<u><u>170,020.54</u></u>

## Transaction Detail by Account

April through June 2021

Type	Date	Num	Name	Memo	Amount
<b>Wells Fargo Bank - Checking</b>					
Paycheck	04/01/2021	DD1140	Wayne Springmeyer Emp	Direct Deposit	0.00
Paycheck	04/01/2021	DD1138	Jennifer Pierce	Direct Deposit	0.00
Paycheck	04/01/2021	DD1139	Stacey Whittaker	Direct Deposit	0.00
Check	04/01/2021		Voya	Payroll expense	-366.12
Deposit	04/01/2021			Deposit	375.00
Deposit	04/05/2021			Deposit	450.00
Check	04/05/2021	1626	Numbers, Inc.	Bookkeeping services	-750.00
Deposit	04/06/2021			Deposit	375.00
Deposit	04/07/2021			Deposit	200.00
Deposit	04/08/2021			Deposit	100.00
Check	04/08/2021	1629	Puliz Records Management	Records storage	-45.00
Check	04/08/2021		AT&T	Telephone expense	-25.05
Check	04/08/2021	1627	Board of Occupational Therapy	Postage reimbursement	-29.09
Check	04/08/2021	1628	Bernstein	Refund	-100.00
Deposit	04/09/2021			Deposit	125.00
Deposit	04/10/2021			Deposit	300.00
Deposit	04/12/2021			Deposit	575.00
Check	04/12/2021		Wells Fargo	Merchant fees	-205.27
Deposit	04/13/2021			Deposit	500.00
Liability Check	04/14/2021		QuickBooks Payroll Service	Payroll expense	-2,957.24
Deposit	04/14/2021			Deposit	500.00
Paycheck	04/15/2021	DD1143	Wayne Springmeyer Emp	Direct Deposit	0.00
Paycheck	04/15/2021	DD1141	Jennifer Pierce	Direct Deposit	0.00
Paycheck	04/15/2021	DD1142	Stacey Whittaker	Direct Deposit	0.00
Check	04/15/2021		Voya	Payroll expense	-366.12
Check	04/15/2021	1632	Silver State Government Relations	Legislative services	-750.00
Check	04/15/2021	1631	State of Nevada IT	Telephone expense	-1.52
Check	04/15/2021	1630	International Hearing Society	Examination materials	-613.77
Deposit	04/16/2021			Deposit	200.00
Deposit	04/17/2021			Deposit	200.00
Deposit	04/18/2021			Deposit	200.00
Deposit	04/19/2021			Deposit	600.00
Deposit	04/20/2021			Deposit	250.00
Deposit	04/22/2021			Deposit	525.00
Check	04/22/2021	1633	Attorney General	Legal fees	-617.44
Check	04/22/2021	1634	Tami Brancamp	Board compensation	-75.00
Check	04/22/2021	1635	Andrea Menicucci	Board compensation	-75.00
Check	04/22/2021	1637	Tom Rainford	Board compensation	-75.00
Check	04/22/2021	1638	Bonnie Lamping	Board compensation	-75.00
Check	04/22/2021	1636	Michael Hodes	Board compensation	-75.00
Check	04/22/2021	1639	Minnie Foxx	Board compensation	-75.00
Deposit	04/23/2021			Deposit	150.00
Deposit	04/24/2021			Deposit	150.00



**BEASP**  
**Transaction Detail by Account**  
 April through June 2021

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Type	Date	Num	Name	Memo	Amount
Deposit	04/25/2021			Deposit	100.00
Liability Check	04/26/2021	E-pay	US Treasury	Payroll expense	-2,609.66
Deposit	04/26/2021			Deposit	550.00
Check	04/26/2021		Wells Fargo	Postage	-14.00
Deposit	04/27/2021			Deposit	300.00
Liability Check	04/28/2021		QuickBooks Payroll Service	Payroll expense	-3,000.87
Deposit	04/28/2021			Deposit	750.00
Paycheck	04/29/2021	DD1146	Wayne Springmeyer Emp	Direct Deposit	0.00
Paycheck	04/29/2021	DD1144	Jennifer Pierce	Direct Deposit	0.00
Paycheck	04/29/2021	DD1145	Stacey Whittaker	Direct Deposit	0.00
Deposit	04/29/2021			Deposit	200.00
Check	04/29/2021		Voya	Payroll expense	-366.12
Deposit	04/30/2021			Deposit	550.00
Deposit	04/30/2021			Deposit	0.37
Deposit	05/01/2021			Deposit	950.00
Deposit	05/02/2021			Deposit	200.00
Deposit	05/03/2021			Deposit	500.00
Deposit	05/04/2021			Deposit	700.00
Deposit	05/05/2021			Deposit	350.00
Deposit	05/06/2021			Deposit	625.00
Check	05/06/2021	1642	Puliz Records Management	Records storage	-45.34
Check	05/06/2021	1641	Nanci Campbell	Exam proctor	-100.00
Check	05/06/2021	1640	Stacey Whittaker	Postage reimbursement	-64.09
Deposit	05/07/2021			Deposit	125.00
Deposit	05/08/2021			Deposit	900.00
Deposit	05/09/2021			Deposit	400.00
Deposit	05/10/2021			Deposit	1,200.00
Deposit	05/11/2021			Deposit	825.00
Liability Check	05/12/2021		QuickBooks Payroll Service	Payroll expense	-3,066.32
Deposit	05/12/2021			Deposit	900.00
Check	05/12/2021		Wells Fargo	Merchant fees	-204.73
Paycheck	05/13/2021	DD1149	Wayne Springmeyer Emp	Direct Deposit	0.00
Paycheck	05/13/2021	DD1147	Jennifer Pierce	Direct Deposit	0.00
Paycheck	05/13/2021	DD1148	Stacey Whittaker	Direct Deposit	0.00
Check	05/13/2021		Voya	Payroll expense	-366.12
Deposit	05/13/2021			Deposit	675.00
Check	05/13/2021	1643	Attorney General	Legal fees	-385.90
Check	05/13/2021	1644	Silver State Government Relations	Legislative services	-750.00
Check	05/13/2021		AT&T	Telephone expense	-25.05
Check	05/13/2021	1645	State of Nevada IT	Telephone expense	-3.03
Deposit	05/14/2021			Deposit	1,050.00
Deposit	05/15/2021			Deposit	350.00
Deposit	05/16/2021			Deposit	250.00
Deposit	05/17/2021			Deposit	600.00

## Transaction Detail by Account

April through June 2021

Type	Date	Num	Name	Memo	Amount
Deposit	05/18/2021			Deposit	825.00
Deposit	05/19/2021			Deposit	1,175.00
Deposit	05/20/2021			Deposit	1,425.00
Deposit	05/21/2021			Deposit	300.00
Deposit	05/22/2021			Deposit	300.00
Deposit	05/23/2021			Deposit	450.00
Deposit	05/24/2021			Deposit	675.00
Liability Check	05/25/2021	E-pay	US Treasury	Payroll expense	-1,739.38
Deposit	05/25/2021			Deposit	975.00
Check	05/25/2021		Wells Fargo	Postage	-29.00
Liability Check	05/26/2021		QuickBooks Payroll Service	Payroll expense	-2,868.21
Deposit	05/26/2021			Deposit	400.00
Paycheck	05/27/2021	DD1150	Jennifer Pierce	Direct Deposit	0.00
Paycheck	05/27/2021	DD1151	Stacey Whittaker	Direct Deposit	0.00
Check	05/27/2021		Voya	Payroll expense	-366.12
Deposit	05/27/2021			Deposit	1,150.00
Check	05/27/2021	1646	Albertsons Consulting Inc.	Licensing system	-200.00
Deposit	05/28/2021			Deposit	200.00
Deposit	05/28/2021			Deposit	0.39
Deposit	05/29/2021			Deposit	300.00
Deposit	05/30/2021			Deposit	450.00
Deposit	05/31/2021			Deposit	800.00
Deposit	06/01/2021			Deposit	1,450.00
Deposit	06/02/2021			Deposit	1,075.00
Deposit	06/03/2021			Deposit	550.00
Deposit	06/04/2021			Deposit	1,125.00
Deposit	06/05/2021			Deposit	200.00
Deposit	06/06/2021			Deposit	200.00
Deposit	06/07/2021			Deposit	500.00
Check	06/07/2021		AT&T	Telephone expense	-25.05
Deposit	06/08/2021			Deposit	750.00
Liability Check	06/09/2021		QuickBooks Payroll Service	Payroll expense	-2,868.21
Deposit	06/09/2021			Deposit	1,225.00
Paycheck	06/10/2021	DD1152	Jennifer Pierce	Direct Deposit	0.00
Paycheck	06/10/2021	DD1153	Stacey Whittaker	Direct Deposit	0.00
Check	06/10/2021		Voya	Payroll expense	-366.12
Deposit	06/10/2021			Deposit	850.00
Check	06/10/2021		Wells Fargo	Merchant fees	-416.09
Deposit	06/11/2021			Deposit	650.00
Deposit	06/12/2021			Deposit	450.00
Deposit	06/13/2021			Deposit	100.00
Deposit	06/14/2021			Deposit	800.00
Deposit	06/15/2021			Deposit	950.00
Deposit	06/16/2021			Deposit	450.00

**BEASP**  
**Transaction Detail by Account**  
 April through June 2021

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Type	Date	Num	Name	Memo	Amount
Deposit	06/17/2021			Deposit	1,000.00
Deposit	06/18/2021			Deposit	650.00
Deposit	06/19/2021			Deposit	300.00
Deposit	06/20/2021			Deposit	150.00
Liability Check	06/21/2021	E-pay	US Treasury	Payroll expense	-1,721.28
Deposit	06/21/2021			Deposit	225.00
Check	06/21/2021	1648	Puliz Records Management	Records storage	-45.00
Check	06/21/2021	1650	Silver State Government Relations	Legislative services	-750.00
Check	06/21/2021	1647	Andrea Menicucci	Replace check #1615	-75.00
Check	06/21/2021	1649	Tim Hunsaker	Exam proctor	-100.00
Deposit	06/22/2021			Deposit	1,025.00
Liability Check	06/23/2021		QuickBooks Payroll Service	Payroll expense	-2,957.24
Deposit	06/23/2021			Deposit	1,375.00
Paycheck	06/24/2021	DD1156	Wayne Springmeyer Emp	Direct Deposit	0.00
Paycheck	06/24/2021	DD1154	Jennifer Pierce	Direct Deposit	0.00
Paycheck	06/24/2021	DD1155	Stacey Whittaker	Direct Deposit	0.00
Check	06/24/2021		Voya	Payroll expense	-366.12
Deposit	06/24/2021			Deposit	625.00
Deposit	06/25/2021			Deposit	525.00
Deposit	06/25/2021			Deposit	50.00
Deposit	06/26/2021			Deposit	275.00
Deposit	06/27/2021			Deposit	200.00
Deposit	06/28/2021			Deposit	450.00
Deposit	06/29/2021			Deposit	950.00
Check	06/29/2021	1651	Melissa Maestas	Exam proctor	-100.00
Deposit	06/30/2021			Deposit	1,225.00
Total Wells Fargo Bank - Checking					15,330.09
<b>TOTAL</b>					<b>15,330.09</b>



State of Nevada

Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board

## AGENDA ITEM 13

### Report from Legal Counsel

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Henna Rasul, Board Counsel will provide the Board with a general update on legal activities.

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**ACTION:** None – INFORMATIONAL ONLY.

**ATTACHMENT(S):** None.



State of Nevada

Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board

## AGENDA ITEM 14

### Reports from Board Chair and Board Members

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- a. Report from Board Chair and Board Members
  - b. 2021 Proposed Meeting Schedule
    - Next Meeting: Wednesday, October 20, 2021 at 4:30pm ~ Teleconference
  - c. Future Agenda Items:
    - (1) Continued work on Future Legislative Efforts to Consider Licensing Speech-Language Pathology Assistants
    - (2) Continued work on Future Legislative Efforts to Consider Licensing Audiology Assistants
    - (3) Continued work on Jurisprudence Exam
    - (4) NAC Revisions for Public Workshop/Hearing Process
    - (5) Consideration of Recommendations from *Advisory Committee on Fitting and Dispensing Hearing Aids* meeting of August 11, 2021
- 

**ACTION:** Take action, table the matter, or take no action.

**ATTACHMENT(S):** None.



State of Nevada

Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board

## AGENDA ITEM 15

### Public Comment

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*No vote may be taken upon a matter raised during a period devoted to public comment until the matter itself has been specifically included on an agenda as an item upon which action may be taken. (NRS 241.020)*

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**ACTION:** None – INFORMATIONAL ONLY.

**ATTACHMENT(S):** None.



State of Nevada

Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board

## AGENDA ITEM 16

### Adjournment

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**ACTION:** Meeting adjourned.

**ATTACHMENT(S):** None.