

Caucus Summary

Tele-health – Not practiced extensively but anticipated both urban and rural opportunities to address weather, transportation, continued advancement of intensive treatment programs. Appreciate continued pursuit of payment of Tele-health services.

Health Care Reform

- Perceived similarities to the BC/BS model of benefit management – Creating need for medical necessity, service redundancy and management of provider benefits
- ASHA suggesting continued advocacy for SLP coverage until specifics become increasingly available.
- Hearing Aid Tax Credit and Tele-health continue to be on the agenda for advocacy efforts.

Collaborative Efforts-

- PIC efforts as discussed last year will potentially fold into the redesign of the website due to the blog and discussion capabilities
- Blog
 - Topic/disease/driven
 - Monthly postings often from other individuals
 - Themed topics posted from other professional practice reps suggested

Ethical Challenges –

- Goals to support budget projections are placed on providers in Long Term Care facilities.
- Challenges to offering opportunity for aggressive treatment being perceived by clinicians with less experience
- System challenges to evaluate new admission and effectively predict frequency, intensity, and duration of treatment
- Ethical assessment protocol, pre-certification demands that are consistent.
 - Technical Assistance Document to address limitations, ethical considerations, and capacity to “defend what we do”,
 - Determine medical necessity in functional terms.
 - Resources needed to defend services “So What” documentation.

Shortages-

- Transitioning professionals from education to medical service provision opportunities
- OMNIE Student experiences sufficient for medical and educational settings.
- Geriatric experience and competence needed
- We as a profession have evolved from “elocutionist” to “hard science trained professional”
 - Specialty Certification

- Clinical Doctoral Programming
- Aggressive Mentor program
- Improved willingness of providers to accept students as a site to mentor
- Looking to develop a fellowship program within institutions rather than job training

Medicare Caps

- ASHA working to develop short and long term successes.
 - ST – working to develop disease specific targets, diagnostic related considerations,
 - Evidence of medical necessary
 - Advocate for health care coverage of SLP services in reform

Con Education

- Education attendance moving more and more to electronic due to costs, digital availability
- Missing networking, advocacy, mentoring, and big picture issues that impact the development of novice members of the profession.
- Liked Pre Convention format starting Thursday
- Appreciated longer opportunity to get CEU's
- Wanted Geriatric vendors
- New Topics Suggested: Motor Speech Disorders, Cognitive, TBI, Geriatric Medicine, Counseling, Leadership, Transitions during middle career, Private Practice, Syndrome, Genetics, Pharmacology, work ethic, generational differences, millennial generation,
- Make trainings available for sale after the convention. Tape presentations and sell "convention" after the fact (ie one member indicated a 6 day convention was available for 90.00)
- Handouts were difficult to benefit from.

Upcoming Continuing Education Events

Grower in CA Ohio Health Dispayr??? Sending me info via email.

Dysphagia Series

Emily Winner Social Strategies

Goals –

1. Increased opportunity, development, and systematic mentoring opportunities between current and developing professionals.
2. Develop current description, rationale, and aggregation of shortage of SLP in the state of Ohio to better develop strategies to reduce and improve services to families.
3. Work to avoid "watering down" training programs to meet shortage demands. Some discussion about New York and how the Dept of Education worked to fund "spaces" in classrooms, professors, etc.

4. Work with statewide industry to foster mentorship capability, clinical fellowship, and provision of direct services to professionals and families alike.
5. Work to tap into historic benefits from members who have worked to shape our organization to minimize the 80/20 rule of organizations.