

JOINT STATEMENT ON CLINICAL SPECIALTY CERTIFICATION FOR AAC by ASHA, CFCC, and AB-AAC

In response to member concerns and inquires, ASHA, the Council for Clinical Certification in Audiology and Speech-Language Pathology (CFCC), and the American Board of Augmentative and Alternative Communication (AB-AAC), would like to offer clarifying, factual information regarding the AB-AAC's work toward creating their clinical specialty certification program in augmentative and alternative communication.

ASHA bylaws establish the CFCC, a semi-autonomous entity of ASHA, as having the authority to define the standards for and monitor programs of specialty certification. The CFCC has a committee, referred to as the Council for Clinical Specialty Certification (CCSC), which approves applications for specialty certification. Once approved by the CFCC, Specialty Certification Boards are independently incorporated and are recognized by ASHA.

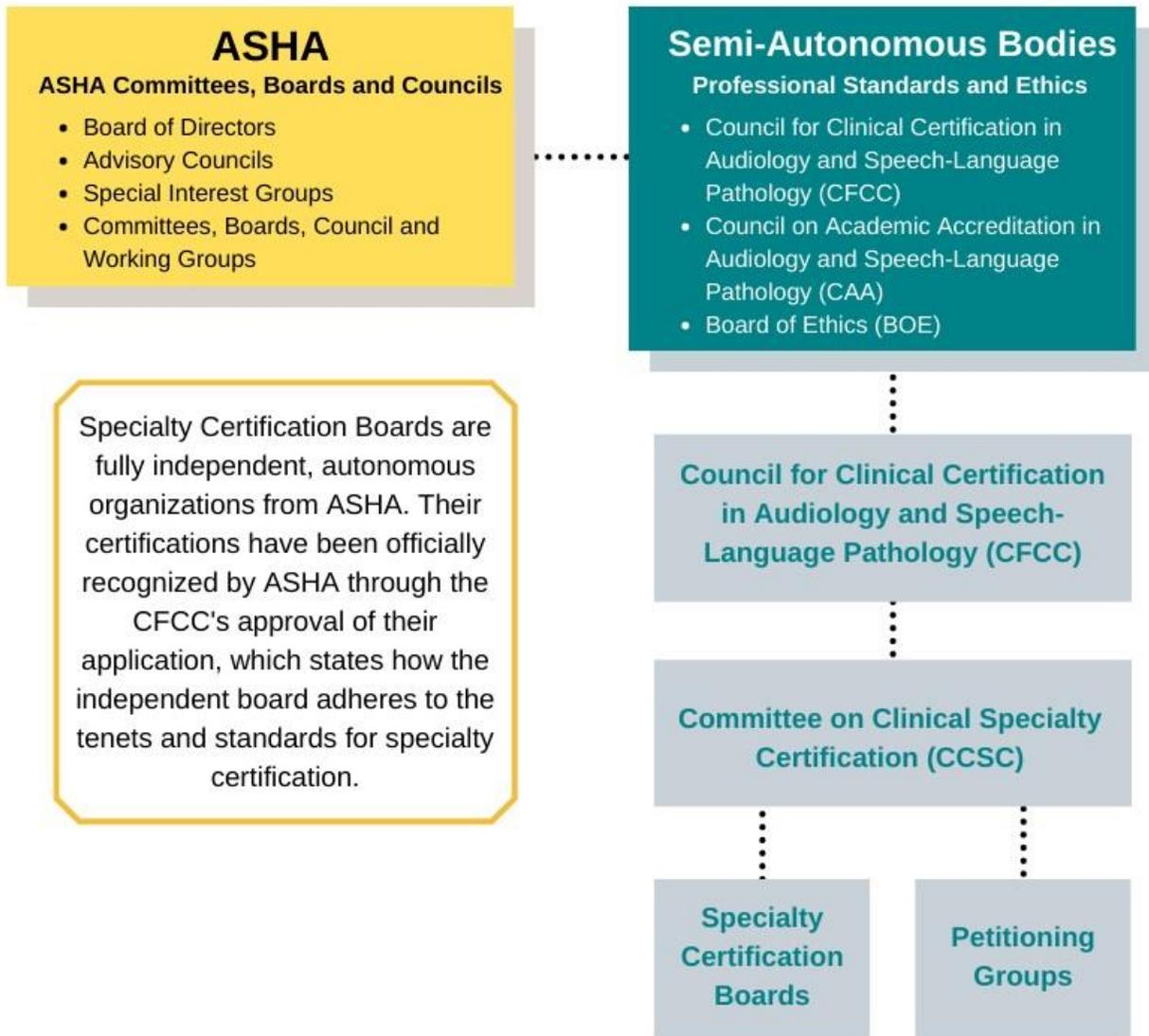
Concern: There is no documented evidence to show that specialty certification in AAC should be explored.

Fact: As part of its process toward the creation of this new Specialty Certification Board, the CCSC sought public comment and fielded a survey on October 30, 2018, to all SIG 12 Affiliates and to all ASHA-certified speech-language pathologists (SLPs) who indicated “augmentative/alternative communication” as an area of expertise on their ASHA account. Follow-up reminders were sent to non-respondents on November 6 and 13, 2018. The survey closed on December 4, 2018, and a total of 3,875 responses were received—a 21.6% response rate—with 82.9% of respondents stating that there should be a specialty certification in AAC.

Concern: The specialty certification process lacks transparency.

Fact: The process of [establishing a new clinical specialty area](#) is fully defined on the ASHA website. As stated above, the CFCC, a semi-autonomous entity of ASHA, has the authority to define the standards for and monitor programs of specialty certification. The CCSC, the CFCC's committee, approves applications for specialty certification. Once the petitioning group's application is approved by the CCSC, the petitioning group is permitted to move forward with becoming an independent specialty certification board, incorporated and recognized by ASHA.

The Specialty Certification Board is responsible for answering all questions directly related to the specialty certification area they are creating. ASHA certified members are encouraged to participate in surveys and peer reviews and to express any concerns or questions about a proposed area of specialty certification being reviewed by the CFCC.



Concern: There is a small, very select, and secret group of individuals who are creating this specialty certification in AAC and who are refusing to allow additional ASHA-certified members to participate.

Fact: The AB-AAC has openly invited certified members to participate in the process of creating this specialty certification. Since 2016, ASHA members were invited to volunteer to participate on Ad Hoc committee efforts through updates on the SIG 12 discussion list, at the annual SIG 12 meeting, at various national conference Town Hall presentations and at numerous workshops and seminars attended by AB-AAC members. Emails received to AB-AAC members expressing interest in specialty certification finish with an invitation to complete a volunteer application.

Concern: ASHA and SIG 12 are creating this specialty certification in AAC.

Fact: ASHA-certified members with expertise in AAC formed a petitioning group and applied to the CFCC for ASHA recognition of a proposed new specialty area. The AB-AAC submitted an application to the CFCC to *begin* the process of obtaining ASHA recognition for this proposed new specialty area. The CCSC of the CFCC approved the application in which the AB-AAC defined their proposed clinical

specialty certification program and demonstrated how their program will comply with the specialty certification standards.

Prior to the AB-AAC receiving Stage 2 approval, ASHA members were invited to publicly comment about the potential new specialty area and the petitioning group by completing a survey. The CCSC receives and uses the survey information to make informed decisions about permitting the petitioning group to move forward with the next phases of the process.

Now that the AB-AAC has received Stage 2 approval, the next step in the process is for them to complete a practice analysis study, which will identify the knowledge and skills that AAC specialists should have. When ready, the practice analysis study will be open for peer review and the AB-AAC will share the results with ASHA members.

Concern: Specialty certification will be required for CCC-holders in order to receive funding for speech generating devices (SGDs).

Fact: There is no evidence to suggest that this is true, has ever happened, or is going to happen. Specialty certifications are common tools to demonstrate and differentiate clinical mastery rather than foundational competence for an intervention or area of practice. Throughout the healthcare system, there is no evidence that specialty certifications have been confused for the baseline standard of practice for licensure and payment. State licensure laws and practice acts, codified after years of advocacy, establish the scope of practice for professionals practicing within a given state for the purpose of coverage and reimbursement. As a result of ASHA advocacy, those policies typically closely mirror the requirements for the CCC and there is no intent to change that in any way.

ASHA remains 100% committed to the principle that the CCCs are the most appropriate standard for the purposes of coverage and reimbursement of audiologists and speech-language pathologists. ASHA believes that a certification should be a standard for coverage and advocates directly for that policy, but that certification is the CCC; it is not, nor will be, any specialty certification.

Concern: SLPs will be required to hold specialty certification in AAC to continue to provide services to individuals who benefit from SGDs.

Fact: This is false. The CCC-SLP (and CCC-A) demonstrates that the certified member is clinically competent and can provide the full range of services as outlined in the ASHA Scope of Practice for Speech-Language Pathology. Specialty certification is an *optional* credential to distinguish clinicians with advanced knowledge, skills, and experience beyond the CCC who wish to easily be identified as an expert in that area of practice.

Concern: Other organizations are advocating to mandate specialty certification for coverage and reimbursement.

Fact: AOTA, APTA, and ASHA all have a range of established specialty and board certifications that exist to help members differentiate their expertise in various areas of practice. None of them are, have ever been, or will be used as a requirement for coverage and reimbursement in that area of

practice. The specialty certification related to AAC will be no different.

Some confusion and concern may have occurred because other organizations, such as the Rehabilitation Engineering and Assistive Technology Society of North America (RESNA), have created distinct certifications that they developed and advocated for implementation as requirements for coverage and payment. ASHA was made aware of this effort to require an external certification in order to receive reimbursement and ASHA successfully opposed this collaboratively with AOTA and APTA. This is not at all what ASHA is doing with the specialty certification program. ASHA is not currently advocating for nor will be advocating for specialty certification to be a qualifier for reimbursement, and would use all its resource to oppose any such suggestion.

Finally, there is not any payment differentiation directly related to specialty certification that exists within scope of practice in audiology or speech-language pathology. Health care services are reimbursed through Current Procedural Terminology (CPT) codes that describe the service being provided, and there are not any CPT codes used by speech-language pathologists or other professionals that distinguish an SLP (or audiologist) with specialty certification from practitioners without specialty certification.